

PO1000042099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

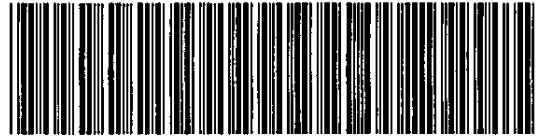
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200081282152

11/07/06--01049--002 **35.00

FILED

06 NOV - 7 AM 10:51

CLERK OF STATE
TALLAHASSEE, FLORIDA

RAch
11/14

Registered Agents
Legal Services, LLC

1220 N. Market Street
Suite 806
Wilmington DE 19801
(302) 427-6970
(800) 400-6650
(302) 421-5753 [fax]
info@IncLegal.com [email]
www.IncLegal.com



November 6, 2006

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RE: Baymead Acquisitions Manager, Inc.

Dear Sir or Madam,

Please find enclosed the Change of Registered Agent Certificate for the above referenced corporation along with our check in the amount of \$35 for your filing fee. Please file and return filed documents to the following address:

Registered Agents Legal Services, LLC
Attn: Denise Fowler
1220 N. Market Street, Suite 806
Wilmington, DE 19801

Please feel free to contact me with any questions at 800-400-6650. Thank you.

Sincerely,

Denise Fowler
Accounts Manager

Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BAYMEAD ACQUISITIONS MANAGER, INC.
(Name of Corporation)

DOCUMENT NUMBER: P01000042099

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Denise Fowler

(Name of Contact Person)

Registered Agents Legal Services, LLC

(Firm/Company)

1220 N Market Street, Suite 806

(Address)

Wilmington, DE 19801

(City/State and Zip Code)

For further information concerning this matter, please call:

Denise Fowler

(Name of Contact Person)

at (800) 400-6650

(Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Baymead Acquisitions Manager, Inc.
2. The principal office address: ATTN: Lynette Hamdi 326 Third Street Lakewood NJ 08701
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/25/2001 Document number: P01000042099

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Robert C Freeland

4521 Atlantic Blvd.

Jacksonville, FL 32207

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Registered Agents Legal Services, LLC

155 Office Plaza Drive, Suite A

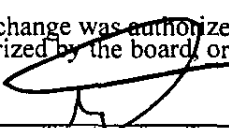
(P.O. Box NOT acceptable)

Tallahassee, FL 32301

FILED
06 NOV - 7 AM 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

David Lichtenstein

(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

11/13/06
(Date)

If signing on behalf of an entity:

MICHAEL W. ASHLEY
(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)