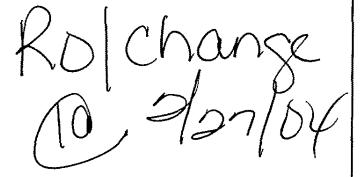
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(Address)				
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LUNCIARY OF STATE
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	 ,
SUBJECT: DAVID BAILEY, Inc. (Name of corporation)	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER: PO200025428	
The enclosed Statement of Change of Registered Office/Agent and fee	e are submitted for filing.
Please return all correspondence concerning this matter to the following	ng:
David R. Bailey (Name of person)	
David Barley, Inc. (Name of firm/company))
6901 Corral Gate Lar	<u>re</u>
Sprasola, FL 34241 (City/state and zip code)
For further information concerning this matter, please call:	
at (941) 922-7059 (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 409 E. Gaines Street Tallahassee, FL 32399 FILED FILED

CR2E045(09/03)

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

	provisions of sections 607.0502, 617.0502, 60		-
change is submit	ted for a corporation organized under the law	vs of the State of Florida	in order
to change its reg	istered office or registered agent, or both, in t	the State of Florida.	
1 The name of the	nc corporation: David Baley	Too.	
2. The principal of		Cools 1 and	
z. mic principare	SALASULA.	FC 34241	
		<u> </u>	
3. The mailing ac	Idress (if different): SAME		
4. Date of incorp	oration/qualification: 3/2002	Document number: P02000	5025428
5. The name and	street address of the current registered agent		
Florida Depart	tment of State:		
	DAVID R. Barley		-
	4503 Proctor R	ond	
	SARASULA FL 3	4a33	10. 6
6 The name and	street address of the new registered agent (if	ahayaad) and (an majatayad affine	产品 日
(if changed):	succe address or the new registered agent (in	changed) and /or registered office	- E- 13 (
	DAVID R. BAILE	4	SEE SEE
	6901 Corral G	pte Lane	15/5 15/5 15/5
	(P.O. Box or personal mailbox	x NOT acceptable)	一
	Sarasoda, FL	34241	
The street addre	ss of its registered office and the street addridentical.	ess of the business office of its regist	tered agent, as
Such change wa the board, or the	s authorized by resolution duly adopted by corporation has been notified in writing of	its board of directors or by an officer the change.	so authorized by
an	organical of officer or director)	DAVID R. BAIL Printed of Fored name and	ey Hile
I hereby accept i I further agree to duties, and I am being filed mere been notified in	the appointment as registered agent and ag o comply with the provisions of all statutes familiar with and accept the obligation of h ly to reflect a change in the registered office writing of this change.	ree to act in this capacity, relative to the proper and complete p ny position as registered agent. Or, e address, I hereby confirm that the c	performance of my if this document is corporation has
an	4 Ma	2/20/04	
Corr.	Signature of Registered Agent)	(Date)	
If signing on bel			
	(Typed or Brinted Name)		
	(Typed or Printed Name)	(Capacity)	

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