

PD2000102320

(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:

10

Office Use Only



100165663241

01/14/10--01023--018 **55.00

FILED

2010 FEB -8 P 5:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Change
Therms
2-9-10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BARAN CONSULTING, INC.
Name of Corporation

DOCUMENT NUMBER: P02000102320

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:

ROBERT W. BARAN
Name of Contact Person

BARAN CONSULTING, INC.
Firm/Company

222 TAHLEQUAH DRIVE
Address

LOUDON, TN 37774
City/State and Zip Code

RWBARAN @ AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT BARAN at (865) 458-4977
Name of Contact Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 20, 2010

ROBERT W. BARAN
BARAN CONSULTING, INC.
222 TAHLEQUAH DRIVE
LOUDON, TN 37774

SUBJECT: BARAN CONSULTING, INC.
Ref. Number: P02000102320

We have received your document for BARAN CONSULTING, INC. and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document submitted are for a Florida limited liability company. The correct form is enclosed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 410A00001534

**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: BARAN CONSULTING, INC.
2. The principal office address: 222 TAHLEQUAH DRIVE
LOUDON, TN 37774
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 23 SEPT. 2002 Document number: P02000102320

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

ROBERT W. BARAN
222 TAHLEQUAH DR.
LOUDON, TN 37774

FILED
200 FEB - 8 P 5:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

PAUL BOUVIER - BOUVIER & ASSOCIATES
3210 N. WICKHAM RD. SUITE 5
P.O. Box NOT acceptable
MELBOURNE, FL 32940

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

ROBERT W. BARAN - PRESIDENT
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, 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

2/3/2000
Date

If signing on behalf of an entity:

PAUL BOUVIER
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)