

(Re	equestor's Name)					
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	WAIT	MAIL MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



000282220080

02/16/16--01031--003 **35.00

16 FEB 16 PM 5: 43

K. Vyrait

COVER LETTER

TO:	TO: Amendment Section Division of Corporations						
CHDI	BOBBY BRADLEY, INC.						
SUBJ	JECT: Name of Corpo	ration					
	P03 000077748						
DOC	UMENT NUMBER:						
The en	nclosed Statement of Change of Registered Office/Ag	ent and fee are submitted for filing.					
Please	e return all correspondence concerning this matter to	he following:					
	BOBBY BRADLEY						
	Name of Contact	Person					
	BOBBY BRADLEY, INC.						
	Firm/Comp	iny					
	1194 Pine Valley Drive						
	Address						
	Wellington, FL 33414-6004						
City/State and Zip Code							
	bobbybradley@bellsouth.net						
	E-mail address: (to be used for futur	e annual report notification)					
For fu	urther information concerning this matter, please call:						
Sharon L. Bradley		561 793-0843					
•		Area Code & Daytime Telephone Number					
	Name of Contact Person	Area Code & Daytime Telephone Number					
Enclos	osed is a \$35.00 check made payable to the Departmen	at of State.					
	Mailing Address: Amendment Section	Street Address: Amendment Section					
	Division of Corporations	Division of Corporations					
	P.O. Box 6327	Clifton Building					
	Tallahassee, FL 32314	2661 Executive Center Circle					
		Tallahaccee FI 32301					

CR2E045 (03/12)

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

-	•		2, 607.1508, or 617.1508, Florida ized under the laws of the State of		
-	•		red agent, or both, in the State of i		
1 The name of th	a comoration:	BOBBY BRADLE	, INC.		
	1. The name of the corporation: 9490 Campi Drive				
2. The principal C	office address	Lake Worth, FL 3	3467		
3. The mailing ad	ldress (if differer	nt):			
4. Date of incorp	oration/qualifica	July 15, 2003	Document number: P03 0	000077748	
		the current registered a f resigned, enter resigne	gent and registered office on file w d)	ith the	
	Kevin M. lura	to (No Longer With	Legal Firm)		
-	Fowler White	Boggs Banker P.A.			
-	501 E. Kenne	edy Blvd., Suite 170	0, Tampa, FL 33602		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):					
, ,	BOBBY BR	ADLEY		EB 16	
-	9490 Cam	pi Drive		P P	
-	Lake Worth	P.O. Box NOT h, FL 33467	acceptable	5: 42 STATE LORIO	
The street address as changed will l	ss of its registere	ed office and the street	address of the business office of it		
			by its board of directors or by an ified in writing of the change.		
·			Bobby Bradley, President		
Signature	e of an officer or direc	etor	Printed or typed name and tit	ile	
I further agree to performance of i agent. Or, if this	o comply with th ny duties, and l s document is be	ne provisions of all statu am familiar with and a ging filed merely to refle	d agree to act in this capacity, ites relative to the proper and con ccept the obligation of my position ect a change in the registered offic n writing of this change.	nplete n as registered ce address, l	
			January 28, 2016		
Sign	ature of Registered Ag		Date		
If signing on beh	•				
Bobby Bradle	y ped or Printed Name				
19	hen at Littlest Maille	* * * FILING FE	E: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)