P03000114504

• .	(Requestor's Name)	
	(Address)	
•	(Address)	
	(City/State/Zip/Phone #)
PICK-L	JP WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
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COVER LETTER

SUBJECT: Baron Diversified Group, Inc (Name)	of Corporation)
	•
DOCUMENT NUMBER: P03000114504	
The enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this i	matter to the following:
Leslie O. or Kimberley D. B	demn
	of Contact Person)
· ·	······································
Baron Diversified Group, I	nc.
	rm/Company)
5125 Palm Springs Blvd.	
-	(Address)
Tampa/Florida/33647	
(City/St	ate and Zip Code)
For further information concerning this matter, pl	ease call:
Leslie O. or Kimberley D. Baron	at (949) 276-4992
(Name of Contact Person)	at (949) 276-4992 (Area Code & Daytime Telephone Number

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

in orde	er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: Baron Diversified Group, Inc.	
2. The principal	I office address: 5125 Palm Springs Blvd. Tan pt E 33647	·
3. The mailing a	address (if different): Same	· · · · · · · · · · · · · · · · · · ·
4. Date of incor	poration/qualification: 10/15/2003 Document number: P03000114504	
	d street address of the current registered agent and registered office on file with the urtment of State:	
	Les Baron	
	86 Costa Brava	
	Laguna Niguel, F. 92677	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	ALL THE STATE OF T
	Les Baron	
	5125 Palm Springs Blvd.	The state of the s
	(P.O. Box NOT acceptable) Tampa/Florida/33647	93
The street address changed will	ress of its registered office and the street address of the business office of its register.	ed agent,
	as authorized by resolution duly adopted by its board of directors or by an officer so the board of the corporation has been notified in writing of the change.	,
100		Director
1	ture of an officer or director) t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete per and I am familiar with and accept the obligation of my position as registered agent, ing filed merely to reflect a change in the registered office address, I hereby confirm is been notified in writing of this change.	formance Or, if this 1 that the
7.,	7-13-08	
(3)	ignature of Registered Agent) (Date)	
	ehalf of an entity:	

* * * 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)