P04000079417.

(Requestor's Name)
(Address)
(Address)
(C) - (C) - (T) - (T) - (T)
(City/State/Zip/Phone #)
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COVER LETTER

SUBJECT: BALUBA, INC (Name of Corporation) DOCUMENT NUMBER: P04000079417 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: Barbara Bauldree (Name of Contact Person) BALUBA, INC (Firm/Company)
DOCUMENT NUMBER: P04000079417 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: Barbara Bauldree (Name of Contact Person) BALUBA, INC
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(Name of Contact Person) BALUBA, INC
(Name of Contact Person) BALUBA, INC
BALUBA, INC
(Firm/Company)
4
4755 Knollwoood Drive (Address)
(riduos)
Tallahassee, FL 32303
(City/State and Zip Code)
For further information concerning this matter, please call:
Barbara Bauldree at (561) 573-3637
Barbara Bauldree at (561) 573-3637 (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 Street Address: Amendment Section
Amendment Section Amendment Section Division of Corporations Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

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

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 t	the corporation: Baluba, Inc	
2. The principal	office address: 4755 Knollwood Drive	
	Tallahassee, FL 32303	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 05/17/2004 Document number: P04000079417	
	d street address of the current registered agent and registered office on file with the rtment of State:	
	Barbara Skeans	
	2496 Thundell Drive	
	Tallahassee, FL 32303	
6. The name and street address of the new registered agent (if changed) and /or registered officer (if changed):		
	Barbara Bauldree	
	4755 Knollwood Drive	
	(P.O. Box NOT acceptable)	
	Tallahassee, FL 32303	
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.	
Acceptance	ure of an officer or directory Cel Ace of Printed or Typed name and tide!	
I hereby accept to a further agree to of my duties, and document is bein corporation has	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 performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	
Ber	bara Bauldue 4/14/08 gnature of Registered Agent) (Date)	
If signing on beh	half of an entity:	
	yped or Printed Name)	

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