

P05000066248
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Feb 3 2005

Florida Department of State
Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 205-0380

From:

Account Name : BILZIN, SUMBERG BAENA PRICE & AXELROD

Account Number : 075350000132

Phone : (305) 374-7580

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DIVISION OF CORPORATIONS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

BANYAN MANAGEMENT SERVICES, INC.

Certificate of Status	0
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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1502, or 617.1502, 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: Baryan Management Services, Inc.
2. The principal office address: 798 Pelican Point Cove, Boca Raton, Florida 33431
3. The mailing address (if different): _____
4. Date of incorporation/qualification: May 5, 2005 Document number: P05000066248
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Theodore R. Stotzer
321 East Hillsboro Boulevard
Deerfield Beach, Florida 33441
6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):
Andrew P. Cohen
798 Pelican Point Cove
(P.O. Box NOT acceptable)
Boca Raton, Florida 33431

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)

Andrew P. Cohen, President
(Printed or typed name and title)

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

5/13/05
(Date)

If signing on behalf of an entity:

(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

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