

P060000148442

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Reg office  
Change

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DR

12/10/08

**COVER LETTER**

**TO:** [REDACTED]  
Division of Corporations

**SUBJECT:** Baker, Kline & Wade  
(Name of Corporation)

**DOCUMENT NUMBER:** P06000148442

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:

Steven Michaels  
(Name of Contact Person)

Baker, Kline & Wade  
(Firm/Company)

5237 NW 33rd Avenue  
(Address)

Fort Lauderdale, FL 33309  
(City/State and Zip Code)

For further information concerning this matter, please call:

Steven Michaels at ( 954 ) 714-0014  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
[REDACTED]  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
[REDACTED]  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 DEC -4 AM 8:00

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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, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Baker, Kline & Wade, Inc.
2. The principal office address: 5237 NW 33rd Avenue  
Ft. Lauderdale, FL 33309
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 11/29/2006 Document number: P06000148442
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)

Steve Michaels

5237 NW 33rd Ave

Ft. Lauderdale, FL 33309

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

(P.O. Box NOT acceptable)

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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.

Kim Davis  
(Signature of an officer or director)

Kim Davis Office Mgr  
(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]  
(Signature of Registered Agent)

11/28/08  
(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  
CR2E045 (8/05)