P07000091291

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



900253545169

11/18/13--01005--018 **35.00

FILED SERVENTIAN PRIZE 28

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: BLOABSTOOTC, COM TVC Name of Corporation			
DOCUMENT NUMBER: P070000 91291			
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:			
DEUUTS CONTUBIEM Name of Contact Person			
BIOABITION COM, TUC			
3801 PLA BUD SURTE 600			
PACIN BEACH GARDEUS JC 33410 City/State and Zip/Code			
City/State and Zip/Code PRIMM (G) BIOABUTUOTA, COM E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (50) 290 - 000 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			

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

CR2E045 (03/12)

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 FULLIPA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: BABBATUOK, CON FUC
2. The principal office address: 3801 Plan BUO STATE 600
- HALM BEACH GARDENS, FL 334DD
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 8/14/07 Document number: 207000091291
 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)
DENNIS CONTUGADO
14243 US HAY ONE
OMO BEACH TO 33408
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): DEVINES CUMTNOHAM 150
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. Computer State Co
If signing on behalf of an entity:
Typed or Printed Name

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

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