P0800067641

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SECRETARY OF STATE TALLAHASSEE, FLOPIDA

APPROVEC FAMO



COVER LETTER

· CR2E045 (8/05)

TO: Amendment Division of 6							
SUBJECT: BTS Land Services Corporation Name of Corporation							
DOGULARNE VIII	0.	-					
DOCUMENT NUMBER: P08000067641							
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:							
	Sandr	a Shinabery					
Name of Contact Person							
BTS Land Services Corporation							
	Firm	n/Company					
_	1555 SW 112th Ave						
	F	Address					
Davie, FL 33325							
City/State and Zip Code							
sandee@btslandservices.com							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
	ndra Shinabery	at (352)	278-2755 time Telephone Number				
Name	e of Contact Person	Area Code & Dayt	ime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.							
		r	ř				
$\cdot P$	Mailing Address	Street Address	**				
1 Poplar	Mailing Address: Amendment Section	<u>Street Address</u> Amendment S	ection				
	Division of Corporations						
	P.O. Box 6327	Clifton Buildi	_				
	Tallahassee, FL 32314	2661 Executiv Tallahassee, F	ve Center Circle				
		i ananassee, i	IJ JEJU I				

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

statement of cha	ange is submitted for a co	rporation organize	507.1508, or 617.1508, Flor d under the laws of the State d agent, or both, in the State	e of Florida	<u> </u>
	the corporation: BTS L office address: 1555 S		/		***************************************
3. The mailing a	address (if different):				
4. Date of incor	poration/qualification:	7/16/2008	Document number:	P0800006	7641
	d street address of the curr rtment of State: (If resigne		at and registered office on fi	le with the	
	Sandra Shinabery				三年 5
	19450 SE 47th Pla	ce			10 HAR
	Morriston, FL 3266	¥			ASSE
6. The name and (if changed):	d street address of the nev	v registered agent (i	if changed) and /or registere	ed office	RA TO STATE
	Sandra Shinabery		 		
	1555 SW 112th Av		***************************************		
	Davie, FL 33325	P.O. Box NOT ac	сертавне		
The street address changed will	ess of its registered offic	e and the street add	dress of the business office	e of its registered	i agent,
Such change w authorized by t	as authorized by resoluti he board, or the corporat	on duly adopted by	y its board of directors or bled in writing of the change	by an officer so	
Signatu	ire of an officer of director	_	Sandra Shinabe Printed or typed name	ry, President	
of my duties, ar document is be	The appointment as regi to comply with the provi nd I am familiar with and ing filed merely to reflec s been notified in writing	l accept the obliga t a change in the r	gree to act in this capacity s relative to the proper and tion of my position as regi egistered office address, T	y, d complete perfo stered agent. O hereby confirm	ormance or, if this that the
	de The		2/25/1	0	
	enalize of Registered Agent		Date		
т	yped or Printed Name				

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