P10000 24321

(Requ	estor's Name)		
(Addre	ess)		
(Addr	ess)		
(City/s	State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Busin	ness Entity Nar	me)	
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



100346089591

06/23/20--01015--014 **35.00

RECEIVED
JUN 2 2 2020

S TALLENT 475 1 1 2020

KI NN

120 JUL 22 NH 8: 12

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: BRIAN BARU COMPANY		
Name of Corporation		
DOCUMENT NUMBER: P10000024321		
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Stephen P Collins		
Name of Contact Person		
Brian Baru Company		
Firm/Company		
2303 NE 29th Terrace, Ste 103		
Address		
Ocala, Florida 34470		
City/State and Zip Code		
accounting@coastbrothers.co	om	
E-mail address: (to be used for future annua	I report notification)	
For further information concerning this matter,	please call:	
Stephen P Collins	at (727)804-8276 Area Code & Daytime Telephone Number	
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	
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statuing is submitted for a corporation organized under the laws of the State of Flori From the change its registered office or registered agent, or both, in the State of Florida.	ida
1. The name of t	the corporation: Brian Baru Company	
2. The principal	office address: 2303 NE 29th Terrace, Suite 103, Ocala, Florida 34470	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 03/18/2010 Document number: P1000002432	<u> </u>
	I street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	ie
	Stephen P Collins	
	6511 43rd Street N, Suite 1807	
	Pinellas Park, FL 33781	سي
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office	2020 JUN 22
	Stephen P Collins	,
	2303 NE 29th Terrace, Suite 103	#H 8:
	P.O. Box NOT acceptable Ocala, FL 34470	12
The street address changed will	ess of its registered office and the street address of the business office of its reg be identical.	gistered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an office board or the corporation has been notified in writing of the change.	cer so
Signatu	Stephen 2. Colling of title Printed or typed name and title	NS P
I hereby accept I further agree t of my duties, an document is bei 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 completed I am familiar with and accept the obligation of my position as registered aging filed merely to reflect a change in the registered office address. I hereby considered in writing of this change.	te performance ent. Or, if this onfirm that the
ter Sig	nature of Registered Agent Date	
If signing on be	half of an entity:	
Stephen (yped or Printed Name	

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