(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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I ALBRITTON

2021 FLO - 5 EN 9: 23

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 279543 7446912

AUTHORIZATION :

COST LIMIT : \$ (35,00

ORDER DATE : December 3, 2021

ORDER TIME : 9:16 AM

ORDER NO. : 279543-016

CUSTOMER NO: 7446912

CHANGE OF AGENT

NAME: BAKER BARRIOS OHIO, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

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

statement of cha	nnge is submitted for a corporation	of 7.0502, 607.1508, or 617.1508, Florida Statutes, a organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	
_	the corporation: BAKER BARRIOS		
2. The principal	office address: 189 SOUTH ORA	NGE AVE STE 1700 ORLANDO, FL 32801	
3. The mailing a	address (if different):	· · · · · · · · · · · · · · · · · · ·	
J	poration/qualification: 06/01/2012	2 Document number: P12000050700	
5. The name and		stered agent and registered office on file with the	
	SCEARCE, KENNETH L SCEA	RCE, SATCHER & JUNG, P.A.	
	P.O. BOX 3060		202
	WINTER PARK	FL 32790	2021 Lee - 5
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
(11 01.11.15-0).	Corporation Service Company		MI 9: 23
	1201 Hays Street		: 23
P.O. Box NOT acceptable			
	Tallahassee	FL 32301	
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registe	red agent,
Such change was authorized by the	as authorized by resolution duly a ne board, or the corporation has be	dopted by its board of directors or by an officer seen notified in writing of the change.	O
	TO TO THE TOTAL OF	Timothy R Baker, President	
Signatu	to of an officer or director	Printed or typed name and title	
l further agree i of my duties, an document is bei corporation has	to comply with the provisions of a	ent and agree to act in this capacity. all statutes relative to the proper and complete pe the obligation of my position as registered agent. e in the registered office address, I hereby confir thange.	rformance Or, if this m that the
- W	Tetichi	12/02/2021	
<u>By: کی کرم در</u> Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Grace E. Kirby,	Asst. Vice President		
· · · · · · · · · · · · · · · · · · ·	yped 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 (04/13)