(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: COVOL BAKER, PA Name of Corporation
DOCUMENT NUMBER: P1300009435
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:
Carol V Baker PA Name of Contact Person JC Penny Realty UC Firm/Company Realty UC Firm/Company Address Lissimmll FL 34747 City/State and Zip Code Carol Richard Realty Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Carol V Bacer at 352, 227 8419 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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.		
Carri 1 2 0 80 . 04		
1. The name of the corporation:		
2. The principal office address: 8701 W 1/10 Pronson McMorial.		
Hwy, Kissimmee, M. 34747		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 1-28-2013 Document number: P13000009435		
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)		
Corporation Service Companti		
1201 Haus Street		
TO 11 0 0 0 0 0 0 22 301		
THE CHARGE PO JEST		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
Rtol Whlo Browson Carol V. Baker		
2701 W Irlo Bronson Memorial Hwy		
P.O. Box NOT acceptable Vicci 101 con 10 m 10 m 3 LL 2 L 2		
175 VICTICE, FC 3-1-T		
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.		
Signature of an officer of director , 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.		
hereby confirm that the corporation has been notified in writing of this change. 12 - 1 - 14		
If signing on behalf of an entity:		
CANNI VI POKEN		
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