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(((H23000224621 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : BEGGS & LANE

Account Number : 120020000155

Phone

: (850)432-2451

Fax Number

: (850)469-3331

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*:

Email Address: STM @ Reggslone.com

## REGISTERED AGENT CHANGE BACKYARD PARADISE, INC.

Certificate of Status	0
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## **COVER LETTER**

TO: Amendment Section Division of Corporations				
Division of Corporations				
BACKVARD BARADICE DIC				
SUBJECT: BACKYARD PARADISE, INC. Name of Corporation		_		
Claims of Corporation				
DOCUMENT NUMBER: P22000077301		_		
The enclosed Statement of Change of Registered (	Office/Agent and fee are submitted for	filing.		
Please return all correspondence concerning this m	natter to the following:	•		
STEPHEN D. WILSON, ESQ.				
Name of Contact Person				
BEGGS & LANE, RLLP				
Firm/Company			•	
501 COMMENDENCIA STREET		-	2023 JUN 23	
Address	<del></del>		<u></u>	وراسا
PENSACOLA, FL 32502				- 27 - 27 - 27 - 27
City/State and Zip Code	<del></del> _	1.	23	-57
SDW@BEGG\$LANE.COM		17	) AM 10: 1	
E-mail address: (to be used for future annual re	eport notification)	_	45	7 0
	·	1012	0.	,,,,
22 6 4 4 6 2		<del>-</del> :	_	
For further information concerning this matter, ple	ase call:			
STEPHEN D. WILSON, ESQ.	at (850 ) 202-3342			
Name of Contact Person	Area Code & Daytime Tele	nlane Slumber		

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
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

(((H23000224621 3)))

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

statement of che	provisions of sections 607.0502, 617.0 ange is submitted for a corporation org er to change its registered office or reg	Ranized under the laws of the	State of F	lorida	nis 	
	the corporation: BACKYARD PARAL		Orane by I in	Ji illu.		
	l office address: 3044 LEES LN.					- -
3. The mailing :	address (if different): 5319 HWY 90 W	. SUITE 102, BOX 203 MOBI	ILE, AL 366	i19	<del></del>	-
4. Date of incor	poration/qualification: 10/07/2022	Document number:	P2200007	7301		_
5. The name an	d street address of the current registered trument of State: (If resigned, enter resigned,	d agent and registered office				<del></del>
	BROWN, HRADLEY Z					
	803 BTENVILLE BLVD					
	DAUPHIN ISLAND, FL 36528			<b>-</b> ,	202	
6. The name and (if changed):	d street address of the new registered a			;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	2023 JUN 23	-==
	STEPHEN D. WILSON, ESQ.			53 53		
	BEGGS & LANE, RLLP, 501 COMMI	ENDENCIA STREET		:	AM IO:	_ ; ;≠=:
		Box: NOT acceptable		<u> </u>	_ —	Ci
	PENSACOLA, FL 32502 US					
The street address changed will	ess of its registered office and the stre be identical.	et address of the business o	ffice of its i	registere	d agent	,
Such change wa authorized by th	as authorized by resolution duly adopthe board, or the corporation has been	ted by its board of directors notified in writing of the ch	or by an ol ange.	Micer so		
		Bradley Brown, Presiden	ıt			
Signitu I hereby accept I further agree i of my duties, an document is bei corporation has	the appointment as registered agent of the appointment as registered agent of to comply with the provisions of all st all I am familiar with and accept the of the filed merely to reflect a change in the seen notified in writing of this change	•			ormanc or if thi that the	e s
	5	6/23	1/2023			
Sig	nuture of Registered Agent	Date	<del>.</del>			
If signing on be	half of an entity:					
τ <sub>y</sub>	ypod or Printed Name					
	* * * FILING E	FEE: \$35.00 * * #				
M	MAKE CHECKS PAYABLE TO F. AIL TO: DIVISION OF CORPORATIONS,			314		

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CR2F:045 (04/13)