1221 Br Miani City/State	Decorporators, Inc. equestor's Name Cacke II Ave., Suite 9 Address FL 33131-3528 Phone # NAME(S) & DOCUMENT NUMBI	900003395539—5 -09/18/0001019015 ******35.00 ******35.00 Office Use Only
1(Cor	poration Name) (Docur	nent #)
☐ Walk in	Pick up time Will wait Photocopy AMENDMENTS	Certified Copy Certificate of Status
Profit NonProfit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/ Director Change of Registered Agent Dissolution/Withdrawal Merger	
Annual Report Fictitious Name Name Reservation	REGISTRATION/ QUALIFICATION Foreign Limited Partnership Reinstatement	SECRETARY OF STATE DIVISION OF COMPORATION OF STATE OF ST
CR2E031(1/95)	Trademark Other	R. A. Charge Examiner's Initials 9-10-2-37

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

the undersigned	e provisions of sections 607.0302, 617.0302, 607.1306, or d corporation organized under the laws of the State of Flo	rida
	lowing statement in order to change its registered office or	registered agent, or both, in
the State of Flo	f the corporation is: Boe Baby Biz, Inc.	
i. The name of	the corporation is.	
2. The mailing	address of the corporation is: 942 Shalimar Pointe Drive	· · · · · · · · · · · · · · · · · · ·
	Shalimar, FL 32579	
3. Date of inco	orporation/qualification: 1/29/99 Document	number: P99000010203
4. The name ar	nd address of the current registered agent and office:	
	Kristen N. Boe	
	942 Shalimar Pointe Drive	00 SEP 14
	Shalimar, FL 32579	=
5. The name at	nd address of the new registered agent and office: (P. O. Box	x Not Acceptable)
	Florida Incorporators, Inc.	
	1221 Brickell Ave. Ste. 900	
	Miami, FL 33131	·
agent, as chan	dress of its registered office and the street address of the bugged, will be identical.	
Such change	was authorized by resolution duly adopted by its board of dyne board.	lirectors or by an officer so
	The sound	8/16/00
(Signatur	re of an officer, chairman or vice chairman of the board)	(Date)
Kristen	n N. Boe, President	
	(Printed or typed name and title)	
Having been i corporation, I I further agre performance o registered age	named as registered agent and to accept service of process I hereby accept the appointment as registered agent and a se to comply with the provisions of all statutes relative to th of my duties, and I am familiar with and accept the obligat ent	s for the above stated gree to act in this capacity. he proper and complete tion of my position as
	3-1-1 B	/21/00
	(Signature of Registered Agent) (L	Date)
If signing on bel	half of an entity:	
Florida	Incorporators, Inc., by Mark Hankins,	
	(Typed or Printed Name)	(Capacity)
	* * * FILING FEE: \$35.00 * * *	
CR2E045(7/97)		

P.O. Box 6327

DIVISION OF CORPORATIONS

TALLAHASSEE, FL 32314