157203

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PACKETARY OF STATE



COVER LETTER

TO:	Amendment Section
	Division of Corporations

SUBJECT:	Bertrand, Inc			
	Name of Corporation			
DOCUMENT NUMBER:_	V57203			
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:				
	Gordon R. Bertrand			
	Name of Contact Person			
	Dardonad Inc.			
Bertrand, Inc				
	Firm/Company			
	304 Maplegrove Avenue			
	Address			
	Uniondale NY 11553			
City/State and Zip Code				
Day BAY BAY BAY QUALIDA CAM				
POOLBOX 304@ PA HOO COM E-mail address: (to be used for future annual report notification)				
2	industrial desired and the second sec			
For further information conc	erning this matter, please call:			
	. Bertrand at (5/6) 48/-3/98 Area Code & Daytime Telephone Number			
Name of Cor	tact 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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stange is submitted for a corporation organized under the laws of the State of $\underline{\ }$ ler to change its registered office or registered agent, or both, in the State of F	Florida
1. The name of	f the corporation: Bertrand, Inc	
2. The principal	al office address: 304 Maplegrove Avenue Uniondale, NY 11553	
3. The mailing a	address (if different):	
4. Date of incor	prporation/qualification: 8/10/1992 Document number:	V57203
	nd street address of the current registered agent and registered office on file wi artment of State: (If resigned, enter resigned)	th the
	James J. Low, III	_
	601 Cleveland Street Suite 400	100 5
	Clearwater, FL 34615	至一
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered off:	JM-5 MO:54
	Leslie R. Baker	- 100 ST
	205 W Dampier Street	- Dr.
	P.O. Box NOT acceptable Inverness, FL 34451	
The street addr	ress of its registered office and the street address of the business office of it lbe identical.	- ts registered agent,
Such change wanthorized by	vas authorized by resolution duly adopted by its board of directors or by an the board, or the corporation has been notified in writing of the change.	officer so
Con	2 don Ber- ture of an office of director that Gordon Ber- Printed or typed name and to	trand President
I further agree	of the appointment as registered agent and agree to act in this capacity, eto comply with the provisions of all statutes relative to the proper and con and I am familiar with and accept the obligation of my position as registere eing filed merely to reflect a change in the registered office address, I here as been notified in writing of this change.	nplete performance d agent. Or, if this by confirm that the
Le L	Qui A Baka 12/11/09 Iignature of Registered Agent Date	
	pehalf of an entity:	•
1	Typed or Printed Name	

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