

LI00004333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

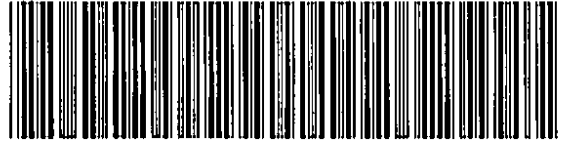
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300317855683

09/06/18--01028--013 **425.00

FILED

2018 SEP - 6 PM 3: 52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D BRUCE
SEP 11 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Salad & Organic Food Services, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bernard H Vogel
Name of Person

Salad & Organic Food Services, LLC
Firm/Company

901-A Clint Moore Road
Address

Boca Raton, FL 33487
City/State and Zip Code

shari@miamisubs.com
E-mail address: (to be used for future annual report notification)

2018 SEP - 6 PM 3: 52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Bernard H Vogel at (516) 395-8103
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Salad & Organic Food Services, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

901-A Clint Moore Road
Boca Raton, FL 33487

901-A Clint Moore Road
Boca Raton, FL 33487

3. 2/29/2016
Date of filing/registration in Florida

4. L16000042356
Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Bernard H Vogel
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
6300 NW 31st Avenue
Fort Lauderdale, FL 33309

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Bernard H Vogel
NEW Registered Office Address:
901-A Clint Moore Road
Boca Raton, FL 33487

FILED
2010 SEP - 6 PM 3:52
STATE DEPT OF STATE
TALLAHASSEE FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Bernard H Vogel

Printed or typed name of signer

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agency

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00