

L16 0000 83541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

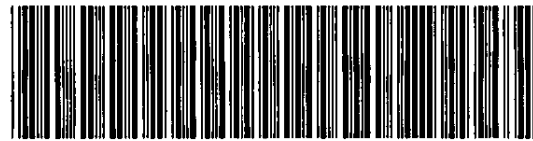
(Business Entity Name)

(Document Number)

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2016 SEP 12 AM 10:41
TALLAHASSEE, FLORIDA

FILED
16 OCT 17 PM 4:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

OCT 18 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 15, 2016

ANA L. FERREIRA
100 WALLACE AVE SUITE 245
SARASOTA, FL 34237

SUBJECT: EVEREST FOOD COMPANY LLC
Ref. Number: L16000083541

RECEIVED
2017 OCT 17 PM 4:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for EVEREST FOOD COMPANY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 316A00019799

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Please Find it Signed. Thanks
Aug

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EVEREST FOOD COMPANY LLC DBA EVEREST FOOD CO.
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:

ANA L FERREIRA

Name of Person

ANAS ACCOUNTING SERVICES CORPORATION

Firm/Company

100 WALLACE AVE SUITE 245

Address

SARASOTA, FL 34237

City/State and Zip Code

RAMOSHANA@COMCAST.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANA L FERREIRA

Name of Person

at (941)

870-3400

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

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**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: EVEREST FOOD COMPANY LLC

2. (a) 100 Wallace Av # 245 Sarasota FL 34237

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) 100 Wallace Av # 245 Sarasota FL 34237

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

04/28/2016

3. Date of filing/registration in Florida

L16000083541

4. Document number

5. (a) ANA L FERREIRA

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

100 WALLACE AVE STE 245 SARASOTA, FL 34237

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

_____, FL _____

(b) SAME

Enter name of NEW Registered Agent and/or NEW Registered Office address:

2133 63RD AVE E. BRADENTON FL 34203

NEW Registered Office Address:

_____, FL _____

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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.

Fabiano de Brida
Signature of a member or authorized representative of a member

FABIANO DE BRIDA

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.

Ana L Ferreira
Signature of Registered Agent