

L20000382728

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : SHEFFIELD & BOATRIGHT, P.A.
Account Number : I20030000090
Phone : (904)733-7900
Fax Number : (904)733-5226

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

Email Address: hsheffield@S-BLAW.COM

LLC REGISTERED AGENT CHANGE THE TIPSy KITCHEN LLC

Certificate of Status	0
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Topsy Kitchen 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:

J. Howard Sheffield

Name of Person

Sheffield & Bostright, P.A.

Firm/Company

6101 Gazebo Park Place, N., Suite 103

Address

Jacksonville, Florida 32257

City/State and Zip Code

hsheffield@s-blaw.com

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

For further information concerning this matter, please call:

J. Howard Sheffield

904

730-5002

at (_____) _____

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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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: The Topsy Kitchen LLC
2. (a) 314 Park Lake Drive, Ponte Vedra, FL 32081
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
314 Park Lake Drive
Ponte Vedra, Florida 32081
- (b) 314 Park Lake Drive, Ponte Vedra, FL 32081
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
314 Park Lake Drive
Ponte Vedra, Florida 32081
3. December 7, 2020
Date of filing/registration in Florida
4. L20000382728
Document number
5. (a) United States Corporation Agents, Inc.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
United States Corporation Agents, Inc.
Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**
5575 S. Semoran Blvd., Suite 36
Orlando, FL 32822
- (b) J. Howard Sheffield
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
J. Howard Sheffield
NEW Registered Office Address:
6101 Gazebo Park Place, N., Suite 101
Jacksonville, FL 32257

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]
Signature of a member or authorized representative of a member

Chandler Sheffield
Printed or typed name of signee

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]
Signature of Registered Agent

J. HOWARD SHEFFIELD

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

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