SIGNATURE	: DIANE M. KOLOPANAS			01/27/2022
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	AUTHORIZED MEMBER	
Name	KOLOPANAS, DIANE	Name	KOLOPANAS, CHARLES	
Address	P.O. BOX 613413	Address	PO BOX 59125	
City-State-Zip:	ROSEMARY BEACH FL 32461	City-State-Zip:	NASHVILLE TN 37205	

Current Mailing Address:

216 BASKIN DRIVE NASHVILLE, TN 37205

POST OFFICE BOX 59125 NASHVILLE. TN 37205 US

FEI Number: 46-2659958

Name and Address of Current Registered Agent:

216 BASKIN DRIVE NICEVILLE, FL 37205 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DIANE M KOLOPANAS Autho

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

Electronic Signature of Signing Authorized Person(s) Detail

MANAGING MEMBER

01/27/2022 Date

FILED Jan 27, 2022 Secretary of State 7233623992CC

Certificate of Status Desired: No

SIGNATURE: DIANE KOLOPANAS

that my name appears above, or on an attachment with all other like empowered.

DOCUMENT# L13000063215

Entity Name: 30A FARMERS' MARKET, LLC

Current Principal Place of Business:

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

KOLOPANAS, DIANE M