# F04000004317

(Re	equestor's Name)		
(Ac	ldress)		
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PICK-UP	☐ WAIT	MAIL	
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S. LASTARY OF STATE STATES OF CORPORATIONS OF CORPORATIONS

C. Lewis 10-13-14

#### **COVER LETTER**

TO: Amer

Amendment Section Division of Corporations

SUBJECT: eDiets, Inc.

Name of Corporation

DOCUMENT NUMBER:

F04000004317

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:

#### Mary Mather

Name of Contact Person

eDiets, Inc.

Firm/Company

14044 Icot Boulevard

Address

Clearwater, FL 33760

City/State and Zip Code

### mmather@infusionbrands.com

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

For further information concerning this matter, please call:

Mary Mather

,727

614-4152

Name of Contact 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	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, unge is submitted for a corporation organized under the laws of the r to change its registered office or registered agent, or both, in the	State of Delawa	are
1. The name of t	the corporation: eDiets, Inc.		
2. The principal	office address: 14044 Icot Boulevard, Clearwater, Flo	orida 33760	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 7/27/2004 Document number:	F04000004	317
	d street address of the current registered agent and registered office rtment of State: (If resigned, enter resigned)	on file with the	
	Healey, Dennis W 14044 Icot Blvd Clearwater, FL 33760	<del></del>	
			14 OC
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or reg	istered office	ASION OF CORPORAT
	Mary Mather		H C:
	14044 Icot Boulevard	····	
	P.O. Box NOT acceptable Clearwater, Florida 33076		
	ess of its registered office and the street address of the business of be identical.		
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors he board, or the corporation has been notified in writing of the ch	or by an officer ange.	so
- Two	Wather mary market of typed Printed or typed	name and title	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this cap to comply with the provisions of all statutes relative to the proper my duties, and I am familiar with and accept the obligation of m is document is being filed merely to reflect a change in the regist that the corporation has been notified in writing of this change.	acity. r and complete y position as rej ered office addi	gistered ess, I
Sig	LONG at Management 9/30/	14	
If signing on be	chalf of an entity:		
MA	CY MATHER Typed or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (03/12)