## F18000005053

(Requestor's Name)
(Address)
(1.001.000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Southern Control of the Control of
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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ARYSEE FL

2022 JAN 14 AM 11: 39

Y SULKER JAN 18 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	12000000	0195				
	REFERENCE	:	373622	8363930				
	AUTHORIZATION	:	Syrell	Lena				
	COST LIMIT	:	\$ 35.00					
ORDER DATE :	January 12, 2022							
ORDER TIME :	9:24 AM							
ORDER NO. :	373622-143							
CUSTOMER NO:	8363930							
<u>CHANGE OF AGENT</u>								
NAME:	LIFE'S ORGANIC	s,	INC					

FORCED UBA: Life's Organics of KY, Fre.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	provisions of sections 607.0502, 61 nge is submitted for a corporation r to change its registered office or i	organized under the law	vs of the State of $\frac{1}{2}$	Kentucky			
<del></del>	he corporation: LIFE'S ORGANIC		,,				
2. The principal	office address: 1614 Dolwick Drive	e, Erlanger, KY 41018					
3. The mailing a	ddress (if different): 2930 N. Aca	demy Boulevard, Colora	ado Springs, CO 8	0917			
	oration/qualification: 10/25/2018		E400000				
5. The name and	street address of the current regist tment of State: (If resigned, enter r	ered agent and registered	d office on file with	the			
	Registered Agents Inc						
	7901 4th Street N, Suite 300						
	St. Petersburg	FL	33702				
6. The name and (if changed):	street address of the new registere	d agent (if changed) and	I /or registered offic	e			
	Corporation Service Company						
	1201 Hays Street			ردٍ			
	P.O. Box NOT acceptable						
	Tallahassee	FL	32301	هو. منابع			
	ss of its registered office and the be identical.						
Such change was authorized by the	is authorized by resolution duly a be board, or the corporation has be	dopted by its board of deen notified in writing o	irectors or by an of of the change.	ilcer so.			
Xie (	almi	Jill Cilmi, Vice	President	型石			
/ 1 "	e of an officer or director		ed or typed name and little				
I hereby accept I further agree to of my duties, an document is bei corporation has Corporation	the appointment as registered ag to comply with the provisions of a d I am familiar with and accept th ng filed merely to reflect a chang been notified in writing of this to a Service Company	ent and agree to act in I Il statutes relative to the ne obligation of my poss e in the registered office nange.	this capacity. e proper and comp ition as registered d e address, I hereby	lete performance agent. Or, if this confirm that the			
ву:	1 M Ley	01/14/2022					
Sig	nature of Registered Agent	•	Date	· ——— -			
If signing on be	half of an entity:						
	Asst. Vice President  vped or Printed Name						

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)