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SECRETARY OF STATE

T. CLINE
NOV - 7 2008
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Nutrition S'Mart of Tam (Name	pa, LLC of Limited Liability Company)	a
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Alvaro Mantilla		
(Name of Person)		
NSM Services, Inc.		7.SE
(Firm/Company)		2008 NOV -6 SECRETARY
		ARY ASSI
4155 B Northlake Blvd.	· · · · · · · · · · · · · · · · · · ·	ES T
(Address)		AH 10: 32 OF STATE
Palm Beach Gardens, FL 33410		32 A.D.A
(City/State and Zip Code)	<u>`</u>	
For further information concerning this mat	ter, please call:	
Trina Armstrong	at ( 561 ) 694-0644	
(Name of Person)	(Area Code & Daytime Telephone Number	er)
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 followi	ng amount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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.

I. Na	me of the limited liability company: Nutrition S	'Mart of Tampa, LLC	. •
2. (a)	Principal office address of limited liability compare (Note: MUST BE STREET ADDRESS)	ility company: 14847 N. Dale Mabry Hwy	
	(Mote: Most be street hebress)	- tampa, F. E. 656-10	. 0
. (b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4155 B Northlake Blvd. Palm Beach Gardens, FL 33410	
01/10	/2006	L06000007628	
3. Da	te of filing/registration in Florida	4. Document number	
5. (a	) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:	
•	Registered Agent:	B&C Corporate Services, Inc.	
•	Registered Office Address:	2 South Biscayne Blvd. One Biscayne Tower, 21st Floor Miami, FL 33131	· ·
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>	D X ≥	Market St.
	NEW Registered Agent:	NSM Services, Inc.	m
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	4155 B Northlake Blvd.	
		Palm Beach Gardens ■,FI 3410 ↔	-
that a office hereb liabili limite	limited liability company is not organized under the fler the change or changes are made, the Florida struct of the registered agent will be identical. Or, in the y confirmed that the change(s) was/were authorized ty company or as otherwise provided in the articles distributed that the change of a member or authorized representative of a member)	eet address of the registered office and the busin case of a Florida limited liability company, it is the an affirmative vote of the members of the li-	iess mited
(Signai	are of a member of authorized representative of a member)		
	o Mantilla d or typed name of signee)	<del></del>	
•	eby accept the appointment as registered agent and ly with the provisions of all statutes relative to the pmilian with and accept the obligations of my position, if this document is being filed to merely reflect of the company has been notificated.	agree to act in this capacity. I further agree to proper and complete performance of my duties, on as registered agent as provided for in Chapte a change in the registered office address, I here is in writing of this change.	and I r 608, by
(Signal	ture of Registered Agent)		

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