

Division of Corporations Public Access System

## Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000266014 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number

: (850)205-0380

: THE FLORIDA COMPANY Account Name

Account Number : I20060000001 : (608)827-5300 Phone

: (608)824-0405 Fax Number

## REGISTERED AGENT CHANGE

## MINDFUL ENTERPRISES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

INHS18(10/99)

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

Pursuant to the provision liability company submits agent, or both, in the State	ns of sections 608.416 or 608.508, Florida Statute s the following statement in order to change its reg e of Florida.	s, the unistered o	ndersign office or	ed lin regisi	nited tered
1. The name of the limite	ed liability company is: MINDFUL ENTERPRISES, LLC				
	f the limited liability company is :				
2413 S. CHURCH AVE TAI	MPA FL 33629	****			
	L06000040813				
4/19/2006  3. Date of filing/registrat		mber			
Ç 2	ered agent and the registered office address as shown		ecords of	fthe	
Proma Deparament of	THE FLORIDA INCORPORATING COMPANY	_			
	Name 1203 GOVERNORS SQUARE, STE. 101	<u>-</u>			
	Address	12	$\mathbf{F}_{\mathbf{S}}$	0	
	TALLAHASSEE, FL 32301  City, State and Zip	<u></u>	FCF	AON 90	
		+ t*	¥£	. ₹	**************************************
6. The name and address	of the new registered agent and/or office:	:	TARY IASSI	1	(Friedman
	Business Filings Incorporated		FP	=	
•	Name 1203 Governors Square, Ste. 101	;	FLORID	AM IO:	CHEST STREET
	Florida street address (P.O. Box NOT acceptable)		ROA	_	
	Tallahassee FL 32301		-		
	City, State and Zip	_		•	
and the business office of liability company, it is he the members of the limite the operating agreement.	mpany is not organized under the laws of the State of thange or changes are made, the Florida street address of the registered agent will be identical. Or, in the case reby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the softhe limited liability company.	s of the n	egistered vrida lim	i offic ited	
	rized representative of a member)				
1 Jona	Than Prigt				
(Printed or typed name of signee	•				
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or if address, I hereby confirm	pintment as registered agent and agree to act in this one of all statutes relative to the proper and complete ad accept the obligations of my position as registered this document is being filed to merely reflect a change that the limited liability company has been notified	apacity. performa layent as re in the i in writin	I furthernice of messions of the second contract of the second contr	r agre 1y dut 2d for 2d offi chan	e to ies, in ce ge.
(Signature of Registered Agent)  Business Divisi	on of Corporations, P.O. Box 6327, Tallahassee, F	L 32314	Į		
INHS18(10/99)	FILING FEE: \$25.00			٠	

H060002660143