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-SECRETARY OF STATE
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T. CLINE

JAN 20 2010

EXAMINER

COVER LETTER

 Division of Corporations 					
	TWMD F				A
Name	of Limited	l Liabil	ity Com	ipany	
Dear Sir or Madam:					
The enclosed Registered Agent/Register	red Office (Change	and fee	(s) are submitted	for filing.
Please return all correspondence concer	ning this m	atter to	the follo	owing:	
Tammy Wright					
Name of Person		<u> </u>			
TWMD Food Services	s IIc				
Firm/Company					
413 South Volusia Ave	enue		_		2010 C
Orange City FI 3276	33				2010 JAN 19 SECRETARY
City/State and Zip Code					PR
E-mail address: (to be used for future annual re	anort notificati	on)	_		PM 1: 35
For further information concerning this					7547
of future information concerning this	matter, pre	ase can	•		
Tammy Wright	at (_	386)	747-422	.2
Name of Person	\		Area Code	e & Daytime Telephon	e Number
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 foll	owing amo	ount:			
✓ \$25 Filing Fee		\$5	55 Filing	g Fee & Certified	Сору

TO: Registration Section

* 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.

1. Name of the limited liability company:	TWMD Food Services IIc			
2. (a) Principal office address of limited liability compan	y: 413 South Volusia Avenue			
(Note: MUST BE STREET ADDRESS)	Orange City FI 32763			
(b) Mailing address of limited liability company:	413 South Volusia Avenue			
(Note: MAY BE POST OFFICE BOX)	Orange City FI 32763			
08/17/07	L07000084663			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:			
Registered Agent:	Tammy Wright			
Registered Office Address:	413 South Volusia Avenue			
	Orange City FI 32763			
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				
NEW Registered Agent:	Michelle Dumph 프로 무			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	413 South Volusia Avenue Orange City FL32763			
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member				
Tammy Wright Printed or typed name of signee	_			
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability company	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.			
Signature of Registered Agent				