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| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to I | Filing Officer: | |
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Office Use Only



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COVER LETTER

| Registration Section Division of Corporations | |
|--|---|
| SUBJECT: Beyord O | Lacence , LLC c of Limited Liability Company |
| Dear Sir or Madam: | |
| The enclosed Registered Agent/Registered Office | ce Change and fee(s) are submitted for filing. |
| Please return all correspondence concerning this | s matter to the following: |
| Venura Solis Name of Person | |
| Beyond Organic, L | LC. |
| 900 South US C | ne ste 105 |
| Jupiter FL 334 City/State and Zip Code | 77 |
| VLRONICA. Solis @ be you | endongaric nutritional. Com |
| For further information concerning this matter, p | please call: |
| Veconica Solis Name of Person | at (561) 290 - 9826 Area Code & Daytime Telephone Number |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec. Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |
| Enclosed is a check for the following a | amount: |
| S25 Filing Fee | ☐ \$55 Filing Fee & Certified Copy |

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: Beyond Organic, LLC | |
|---|----------------|
| 2. (a) | |
| Principal office address of limited liability company: Mailing address of limited liability company | 7; |
| | 0 > |
| Kushkonong, MO 65692 Kushkonong, MO 1056 | 2701 |
| | |
| 10/08/2009 LU9000097251 | |
| 3. Date of filing/registration in Florida 4. Document number | |
| 5. (a) Duke Ken | |
| Registered Agent and Registered Office shown on the records of the Florida Dept. of State: | |
| Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | — |
| Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | - i |
| <u></u> ω΄ | 1 |
| <u>Jupiter</u> .FL 33458 | . |
| ب من | رب.۱ |
| (b) | |
| | |
| NEW Registered Office Address: | |
| NEW Registered Office Address: | |
| 512 105 | |
| Jeepster FL 33477 | |
| | |
| If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that aft the change or changes are made, the Florida street address of the registered office and the business office of the regis | stered |
| agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided | s) Lin |
| the articles of organization or the operating agreement of the limited liability company. | |
| Signature of a member of a member Printed or typed name of signee | |
| I hereby accept the appointment as revistered ovent and overe to act in this capacity. I further coree to camply with | h the |
| provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and a the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has be | ccept filed |
| notified in writing of this change. | en |
| Signature of Registered Agent | |