## 100000087340

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 866024 8415576						
AUTHORIZATION CARELOCCEMON						
COST LIMIT :(/\$_25.00						
ORDER DATE : July 12, 2023						
ORDER TIME : 9:25 AM						
ORDER NO. : 866024-066						
CUSTOMER NO: 8415576						
CHANGE OF AGENT						
NAME: LATINA BOULEVARD FOODS, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:  CERTIFIED COPY XX PLAIN STAMPED COPY						

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

## 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. Na	ame of the limited liability company:LATINA BOL	ULEVARD FO	DODS, LLC		
2. (a)		(b	)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		N	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  atral Avenue  sburg, FL 33713	
	2151 Central Avenue		2151 Cent		
	St. Petersburg, FL 33713		St. Peters		
	08/19/2010		L10000087	340	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)					
J. (a)	Registered Agent and Registered Office shown on the record	ls of the Florida	Dept. of State	:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	1200 South Pine Island Road			20 St.	
	Plantation	, FL_33324		چې 2023 يانار د د د د د د د د د د د د د د د د د د د	
(b)					
	Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company			P <sub>H</sub> 33	
				PH 5: 3:	
	NEW Registered Office Address:			/n <b>9</b>	
	1201 Hays Street				
	Tallahassee	. FL_32301			
Signa  I herei provisi the obl to merei	imited liability company is not organized under the or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited at each organization or the operating agreement of the officer authorized by an affirmative vote of the member cles of organization or the operating agreement of the officer authorized representative of a member by accept the appointment as registered agent and completions of my position as registered agent as proved the proper and completely reflect a change in the registered office address of in writing of this change.	the registered liability constructed from the limited	d office and upany, it is ted liability ability compilities. Author in this capa	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.  rized Person  Printed or typed name of signee  city. I further agree to comply with the	

Signature of Registered Agent

Grace E. Kirby, Asst. Vice President