## 4000011799

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## **COVER LETTER**

Division of Corporations		
SUBJECT: Fresh Premier, L	LC	
	Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered O	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning to	this matter to the following:	
Kenia Brown		
Name of Person	<u></u>	
Fresh Premier, LLC		
Firm/Company		
P.O. Box 18022		
Address		
West Palm Beach FL 33	3416	
City/State and Zip Code		
freshpremier@gmail.con	n	
E-mail address: (to be used for future annual report no		
For further information concerning this matter	er, please call:	
Kenia Brown	<sub>at (</sub> 754 ) 200-1848	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the followin	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.

1. Name of the limited liability company: Fresh Premier.	rrc
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	pany: 933 S Military Trail Suite E12 West Palm Beach, FL 33415
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P.O. Box 18022 West Palm Beach, FL 33416
November 10, 2010	L10000117799
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:	Mack Management Services Trust
Registered Office Address:	2500 Quantum Lakes Drive Suite 203 Boynton Beach FL 33426
(b) Enter name of NEW Registered Agent and/or	NEW Registered Office address:
NEW Registered Agent:	Kenia Brown
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	933 S Military Trail Suite E12 West Palm Beach FL 33415
If the limited liability company is not organized under confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member Kenia Brown  Printed or typed name of signee	he Florida street address of the registered office dentical. Or, in the case of a Florida limited ge(s) was/were authorized by an affirmative vote of erwise provided in the articles of organization or,
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of m Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability compositions of Registered Agent	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, by position as registered agent as provided for in a merely reflect a change in the registered office upany has been notified in writing of this change.

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