

L130000058831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

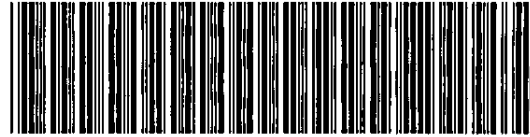
L13-58831

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 JAN 29 AM 10:32

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N. Gulligan JAN 29 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Generational Cooking, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Linda P. Ratz-Thompson
Name of Person

Generational Cooking, LLC
Firm/Company

107 2nd Street
Address

Melrose, FL 32666
City/State and Zip Code

Ladybldr61@windstream.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Linda P. Ratz-Thompson at (352) 475-3826
Name of Person Area Code & Daytime Telephone 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 following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 16, 2014

LINDA P. RATZ-THOMPSON
107 2ND STREET
MELROSE, FL 32666

SUBJECT: GENERATIONAL COOKING, LLC
Ref. Number: L13000058831

We have received your document for GENERATIONAL COOKING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan
Regulatory Specialist II

Letter Number: 314A00001099

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

Pursuant to the provisions of sections 605.0114, 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: Generational Cooking, LLC

2. (a) Principal office address of limited liability company: 107 2nd Street
Melrose, FL 32666
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

April 23, 2013
3. Date of filing/registration in Florida

L13 000058831
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Elizabeth Smith

Registered Office Address:

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

Linda P. Ratz-Thompson

NEW Registered Office Address:

107 2nd Street

(MUST BE FLORIDA STREET ADDRESS)

Melrose

,FL 32666

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]
Signature of a member or authorized representative of a member

Linda P. Ratz-Thompson
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00