

L130000 61228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

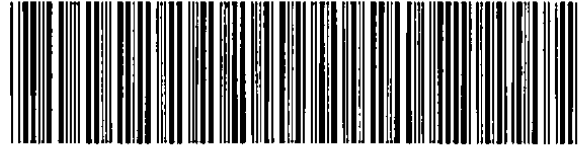
(Document Number)

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19 SEP 16 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 16 2019

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 9, 2019

BETH BOLLDING
BOLDING FAMILY FARM
3355 CHERRY STREET
COCOA, FL 32926

SUBJECT: BOLDING FAMILY FARM LLC
Ref. Number: L13000061228

We have received your document for BOLDING FAMILY FARM LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 419A00018514

2019 SEP 16 AM 11:23

RECEIVED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Bolding Family Farm 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:

Beth Bolding

Name of Person

Bolding Family Farm

Firm/Company

3355 Cherry ST

Address

Cocoa, FL. 32926

City/State and Zip Code

jbolding1@cfl.rr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Beth Bolding

at (**321**)

639-6097

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

**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: Bolding Family Farm LLC
2. (a) 3355 Cherry ST Cocoa, FL 32926
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
- (b) 3355 Cherry ST Cocoa, FL 32926
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

3. 1/08/2019 Last / Started 4/26/2013 Date of filing/registration in Florida
4. L13000061228 Document number

5. (a) UNITED STATES CORPORATION AGENTS, INC.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

5575 S. SEMORAN BLVD Suite 36

Orlando, FL 32926

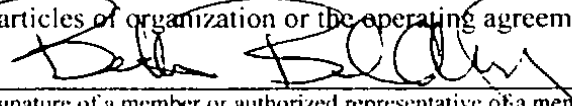
- (b) Beth Bolding
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:

3355 Cherry St

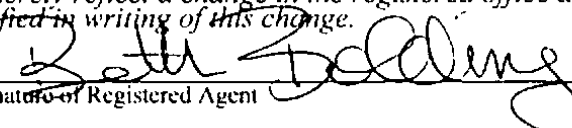
Cocoa, FL 32926

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 or authorized representative of a member

Beth Bolding
Printed or typed name of signee

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 of Registered Agent

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

FILED
19 SEP 16 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA