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## COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: BEE ORGANICS, 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:

Frank Coniglio

Name of Person

E.R. Bradley's, Inc.

Firm/Company

104 Clematis Street

Address

West Palm Beach, FL 33401

City/State and Zip Code

pereboomcpa@msn.com

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

For further information concerning this matter, please call:

Frank Coniglio	561 833-3520	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following	g amount:	
\$25 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.

<sub>(b)</sub> 104 (	Clematis Street
(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
104 C	Clematis Street
West	Palm Beach, FL 33401
L1300	0098254
4.	Document number
f the Florida Dept. of	State:
ADDRESS)	
L_33418	۲۵۳- ۱۹۰۰ - ۲۰۰۰ ۱۹۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰
ed Office address:	
<sub>L</sub> 33401	
of the registered of liability company, of the limited liab he limited liability	
Frank Cor	
gree to act in this te performance of led for in Chapter I hereby confirm t	Printed or typed name of signee capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been
	104 C West L1300 4. (I) L1300 4. (I) L1300 2

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