113000130731

| (Requestor's Name) | | | | |
|---|--------------|-----------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | | |
|--|--|--|
| Caladium Catering LLC SUBJECT: | | |
| | e of Limited Liability Company | |
| Dear Sir or Madam: | | |
| The enclosed Registered Agent/Registered Offic | ce Change and fee(s) are submitted for filing. | |
| Please return all correspondence concerning this | matter to the following: | |
| Paul Grimond | | |
| Name of Person | | |
| Caladium Catering LLC | | |
| Firm/Company | | |
| 17214 Salemo Drive | | |
| Address | *,*** | |
| Bradenton | | |
| City/State and Zip Code | | |
| FL34202 | | |
| E-mail address: (to be used for future annu | al report notification) | |
| For further information concerning this matter, p | please call: | |
| Paul Gerimond | 941 518 7740 at () | |
| Name of Person | Area Code & Daytime Telephone Number | |
| Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | |
| Enclosed is a check for the following a | 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.

| I. i | Name of the limited liability company: Caladium Cateri | ng LLC | |
|-----------------------------------|--|---|---|
| 2. (a |) | (b) | |
| Ç | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | 17214 Salerno Drive | ı | 17214 Salerno Drive |
| | Bradenton FL 34202 | | Bradenton FL34202 |
| | 02/04/2022 | L.I | 13000130731 |
| 3. | Date of filing/registration in Florida | 4. | Document number |
| 5. (: | 1) | | |
| J. ((| Registered Agent and Registered Office shown on the records o | f the Florida D | Dept. of State: |
| | Koontz & Parkin CPA | | |
| | Registered Office Address (MUST BE FLORIDA STREET | (ADDRESS) | |
| | 1613 Fruitville Road | | |
| | | T. 34236 | SECRE TALL |
| | , | ' | |
| (b | | · | |
| | Enter name of NEW Registered Agent and/or NEW Registere | ed Office addr | rest: |
| | Paul Grimond | | M 7:27 |
| | NEW Registered Office Address: | | FLE ALE |
| | 17214 Salerno Drive | | |
| — | Bradenton , F | L | |
| changen was/ the a | e limited liability company is not organized under the la ge or changes are made, the Florida street address of the i will be identical. Or, in the case of a Florida limited I were authorized by an affirmative vote of the members rticles of organization or the operating agreement of the mature of a member of authorized representative of a member | e registered iability com of the limite e limited lial Paul G | office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in ibility company. Frinted or typed name of signee |
| provi the o to me notifi | reby accept the appointment as registered agent and agistions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, led in writing of this change. | gree to act in e performan ed for in Ch hereby conj | n this capacity. I further agree to comply with the ace of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been |
| ាខ្សារ | iture of Registered Agent | | |