## 44000176537

(Requestor's Name)					
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(City/State/Zip/Phone #)					
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## COVER LETTER

Division of Corporations						
PSM BEE RIDGE, LLC						
_ <del></del>	Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this ma	atter to the following:					
Jennifer Martin						
Name of Person	<del></del>					
Publix Super Markets, Inc.						
Firm/Company	<del></del>					
3300 Publix Corporate Parkway						
Address	<del></del>					
Lakeland, FL 33811						
City/State and Zip Code	<del></del>					
EntityFilings@publix.com						
E-mail address: (to be used for future annual r	report notification)					
For further information concerning this matter, plea	ise call:					
Jennifer Martin	863 688-7407					
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					
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.

1. Na	nme of the limited liability company: PSM BEE RI	DGE, L	LC		
2. (a)	3300 Publix Corporate Parkway	(H	(b) 3300 Publix Corporate Parkway		
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:  (Note: MAY BE PQST OFFICE BOX)	
	LAKELAND, FL 33811	<u>.                                    </u>	LAKEL	AND, FL 33811	
	11/13/2014	_ <del></del> .	L140001	76537	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	John A. Attaway, Jr.				
. ,	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	- e:	
	3300 Publix Corporate Parkway				
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRESS</u>	2	-	
	Lakeland	33811		- 연 구.	
(b)	Merriann M. Metz			- जि. सि. स. स.	
(17)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			- -	
	Q				
	Jame			,	
	NEW Registered Office Address:			Ç.	
	FL	·	•. •	-	
the cha agent v was/we	imited liability company is not organized under the lavinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of the organization of the operating agreement of the Management of the Management of the Management of the Management of the members of the formal street and the members of t	the reginability confithe limited l	stered office ompany, it is lited liability liability con	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
Signal	ture of a member or authorized representative of a member		-	Printed or typed name of signee	
provisi the obl. to mere notified	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I is I'm writing of this change.	ree to act perform d for in ( hereby co	in this cap ance of my Chapter 605 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	