L150000029827

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

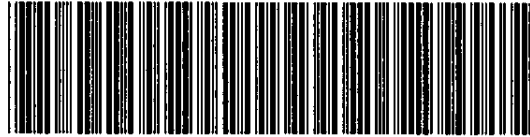☐ PICK-UP   ☐ WAIT   ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

300271091123

03/27/15--01017--004   **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 MAR 27 PH 3: 41

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **PALM BEACH ORGANIC BABY FOOD, 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:

Jonathan Chambers

Name of Person

Law Offices of David W. Spicer, P.A.

Firm/Company

8895 N. Military Trail, Suite 302E

Address

Palm Beach Gardens, FL 33410

City/State and Zip Code

jchambers@davidspicerlaw.com

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

For further information concerning this matter, please call:

Jonathan Chambers   at (561) 625-6066

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 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. Name of the limited liability company: **PALM BEACH ORGANIC BABY FOOD, LLC**

2. (a) _____   (b) _____

    Principal office address of limited liability company: Mailing address of limited liability company:
    (Note: MUST BE STREET ADDRESS)   *(Note: MAY BE POST OFFICE BOX)*

    208 MOCCASIN TRAIL   208 MOCCASIN TRAIL

    JUPITER, FL 33458   JUPITER, FL 33458

    02/17/2015   L15000029827

3. Date of filing/registration in Florida   4.   Document number

5. (a) **CHAMBERS, JONATHAN**

    Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

    Registered Office Address   *(MUST BE FLORIDA STREET ADDRESS)*
    11000 PROSPERITY FARMS ROAD, Suite 104

    PALM BEACH GARDENS   , FL 33410
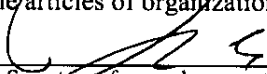
    (b) **LAW OFFICES OF DAVID W. SPICER, P.A.**

    Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

    NEW Registered Office Address:
    8895 N. Military Trail, Suite 302E

    Palm Beach Gardens   , FL 33410

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.

_____   Jonathan Chambers
Signature of a member or authorized representative of a member   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