L15000037369

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SECRETARY OF STATE
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(19) 17 296 (19) (1977)

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Life force	farms, LL & ited Liability Company		
Name of Lim	ited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change	ge and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter	to the following:		
SEAN W. FELD MAYER Name of Person	· ·		
Life forme farms, 2LC Firm/Company			
324 River Park D	R.		
			
SEAN FELDMAYER @ gmail. C. E-mail address: (to be used for future annual report	on t notification)		
For further information concerning this matter, please ca	all:		
Sean W. Feldmayer at (484) 571-52-70 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)			



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Letter Number: 115A00015071

FLORIDA DEPARTMENT OF STATE RY OF STATE Division of Corporation ALLAHASSEE, FLORIDA

July 17, 2015

SEAN W FELDMAYER 224 RIVER OARK DR JUPITER, FL 33477

SUBJECT: LIFE FORCE FARMS, LLC

Ref. Number: L15000037369

We have received your document for LIFE FORCE FARMS, 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):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6051.

Tammy Hampton
Regulatory Specialist III

www.sunbiz.org

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. Life force farms LLC 1. Name of the limited liability company: (b) Principal office address of limited liability company: Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) (Note: MUST BE STREET ADDRESS) Date of filing/registration in Florida 3. ervices I Lox Ahatchee, Fl 33470 67th Court North (MUST BE FLORIDA STREET ADDRESS) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW** Registered Office Address: JUPITER FL _{.FL}33477 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 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