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(Cit	ly/State/Zip/F110ffe	: #)					
PICK-UP	WAIT	MAIL					
(Business Entity Name)							
(50	isiness Chity Nan	ne)					
(Document Number)							
Certified Copies	Certificates	of Status					
Special Instructions to	Filing Officer:						
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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Boggy Girl Cakes, 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:
Shannon Ericksen Name of Person
Boggy Girl Cakes Firm/Company
545 B Schneider Dr Address
Fort Walton Beach, Fl 32547 City/State and Zip Code
Shannon mad 9 @ qmail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Shannon Ericksen at (850) 226-261/ 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 Enclosed is a check for the following amount: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

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	me of the limited liability company: Boggy Gir	1 Cake	S LL	<u> </u>	
					_
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			-	limited liability company: POST OFFICE BOX)
	545 B. Schneider Dr		545	B Scl	nneider Dr
	Fort Walton Beach, Fl 32547		Fort	Walton	Beach, FL 32547
	5/19/2015			5/19/2	015
3.	Date of filing/registration in Florida	4.	D	ocument nun	nber
5. (a)	Corporation Service Company Registered Agent and Registered Office shown on the records of the	e Florida Dept	t. of State:		
	Registered Office Address (MUST BE FLORIDA STREET AD	DRESS)			
	1201 Hays Street				
	1201 Hays Street Tallahassee ,FL	3230/			
(b)	Shannn Ericksen Enter name of NEW Registered Agent and/or NEW Registered O	office address	;		T 23 PH 2
	NEW Registered Office Address:	·			PH 2: 38 EE, FLORID
	545 B Schneider Dr				→
	Fort Walton Beach ,FL	3254 <u>7</u>	<u></u>		
the cha agent v was/we	imited liability company is not organized under the laws ange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	he registere pility compa the limited mited liabi	ed office a any, it is l liability of lity comp	and the busing hereby confir company or a any.	ess office of the registered med that the change(s) is otherwise provided in
Signa	ture of a member or authorized representative of a member	Shani	non E	ricksen Printed or typed	name of signee
provisi the obl to mer notifie	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I he d in writing of this change.	e to act in t erformance for in Chap ereby confir	his capac e of my du oter 605, i rm that th	city. I further uties, and I ar F.S. Or, if th we limited liab	agree to comply with the n familiar with and accept is document is being filed pility company has been
Signatu	ann Crickson Ire of Registered Agent				