8/20/2018

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000243709 3)))



H180002437093ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (858)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:\_\_\_\_\_

## LLC REGISTERED AGENT CHANGE ANCIENT BRANDS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

Electronic Filing Menu — Corporate Filing Menu

Help

## 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.

	me of the limited liability company: Ancient Brands	<del></del>	
(n)		(b)	
. (4) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company; (Note: MAY BE POST OFFICE BOX)
	415 Duke Drive, Suite 380		llory Lane, Suite 130-307
	Franklin, TN 37067		TN 37067
	03/07/2016	L1600004	5737
	Date of filing/registration in Florida	4.	Document number 6
(a)	Registered Agent and Registered Office shown on the records		- 5
	Registered Agent and Registered Office shown on the records DUKE, KENNETH A. JR	of the Florida Dept, of St	ate:
	Registered Office Address	T ADDRESS)	
	924 Pompano Drive		
	Jupiter	FL_33458	
	C T Corporation System  NEW Registered Office Address:		
	1200 South Pine Island Road		<del></del>
	Plantation	11771	
	Plantation	FL_33324	
he cha agent v was/we he art Signa I here orovis the obta	imited liability company is not organized under the range or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the agreement of the accept the appointment as registered agent and lines of all statutes relative to the proper and compilions of all statutes relative to the proper and compilions of my position as registered agent as proved y reflect a change in the registered office accuracy of this change.	laws of the State of sof the registered off I liability company, it is of the limited liability the limited liability company.  Ryan Stamme	Florida, it is hereby confirmed that after ice and the business office of the registere t is hereby confirmed that the change(s) elity company or as otherwise provided in ompany.  Printed or typed name of signee

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00