9/19/2019

Division of Corporations



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LLC REGISTERED AGENT CHANGE ANCIENT BRANDS, LLC

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SEP 2 0 2019

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 submus the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	dame of the limited liability company: ANCIENT BRAN	NDS, LLC	
2 (a)	·	(h)	
- - (44)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	415 DUKE DR STE 380 FRANKLIN, TN 37067		
	03/07/2016	L164	000045737
3.	Date of filing/registration in Florida	4,	Document number
5. (a	Kenneth Duke		
(b)	Registered Agent and Registered Office shown on the records of	the Florida Dept	i, of State:
	Registered Office Address (MUST BE PLORIDA STREET)		
	924 Pompano Dr		
	Jupiter, FL	33458	
	C T Corporation System		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		
	NEW Registered Office Address:		
	1200 South Pine Island Road		<u>့်</u> မွှဲ ——
	Plantation, FL	33324	
the chagent was/v the ar	limited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lievere authorized by an affirmative vote of the members of the organization or the operating agreement of the	the registere ability compa of the limited limited	d office and the business office of the registered my, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company. Member
7	name of a member or authorized representative of a member		Printed or typed name of signee
provi. the of to me	eby accept the appointment as registered agent and agsistions of all statutes relative to the proper and complete obligations of my position as registered agent as providerely reflect a change in the registered office address. I see in writing of this change.	ree to act in to performance ed för in Chap hereby confir	his capacity. I further agree to comply with the of my duties, and I am familiar with and accept of 605, F.S. Or, if this document is being filed in that the limited liability company has been
By:	C T Corporation System Sarah Revelle, Asst. Secretary		
Signa	ture of Regrittered Agent		