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.

(((H160000830103)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : URS AGENTS LLC

Account Number : I20150000127

: (800)567-4397

Fax Number : (800)567-4398

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

Email Address:\_carolprihoda@icloud.com

## LLC REGISTERED AGENT CHANGE WHOLE GRAIN HARMONY LLC

Certificate of Status	0
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## COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: WHOLE GRAIN HARMONY	(LLC		
· · · · · · · · · · · · · · · · · · ·	e of Limited Liability Company		
Dear Sir or Madam:			
The analogad Designation of the AM and the AM			
The enclosed Registered Agent/Rogistered Offi	ce Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this	s matter to the following:		
CAROL PRIHODA			
Name of Person			
WHOLE GRAIN HARMONY LLC			
Firm/Company			
13411 SWIFTWATER WAY			
Address			
LAKEWOOD RANGH, FL 34211			
City/State and Zip Code	<del></del>		
caro prlhoda@icloud.com	·		
E-mail address: (to be used for future annu-	al report notification)		
For further information concerning this matter, p	please call;		
URS Agents C/O Kanetha Bishop	800 567-4397		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations Clifton Building	Division of Corporations		
2661 Executive Center Circle	P.O. Box 6327 Tallahessee, Florida 32314		
Tallahasseo, Plorida J2301	Tations society and the		
Enclosed is a check for the following a	mount		
1 \$25 Filling Fee	S55 Filing Fee & Certified Copy		
NHS18 (2/14)			

(((H16000083010 3)))

## 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:

L. N	ame of the limited liability company: WHOLE GRA	AIN HA	RMONY	rrc			
2. (a)							
, ,	Principal office address of limited liability company: (Note: MUST DE STREET ADDRESS)		- / <del></del>	Mailing address of	flimited liabil	ity compa	ny:
	13411 SWIFTWATER WAY			([4018: 14171 <u>0</u> 2	e Post Ver	<u> (ÇB DV)</u>	,
	LAKEWOOD RANCH, FL 34211						
	03/21/2016		L160000	57581			
3.	Date of filing/registration in Florida	4,	···	Document nui	nber		
5. (a)	Registered Agent and Registered Office shown on the records of						
	Registered Agent and Registered Office shown on the records of CAROL A PRIHODA	the Florid	a Dapi, of Sta	ie:			
	Registered Office Address <u>ALUST BE PLORIDA STREET</u> 13411 SWIFTWATER WAY	ADDRES:	<u>87</u>	_			
. ,	LAKEWOOD RANCH , FL	34211		_		2016 APR	
(6)	Buter name of NEW Registered Agent and/or NEW Registered		dress;	-	AFASSEE. F	<u>.</u>	
	NEW Registered Office Address:			-	TORN	ċ	N. a.
	3458 LAKESHORE DRIVE			-		C.	
•	TALLAHASSEE , PL	32312		_			
the char agent w was/we the artic	mited liability company is not organized under the law nigo or changes are made, the Florida street address of rill be identical. Or, in the case of a Florida Ilmited lia re authorized by an affirmative vote of the members of cless of organization or the operating agreement of the member of a member or authorized representative of a member of a member of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have ring of this change.	the registed lity confidence of the limited li	etered officempany, it is ited liability con lability con	e and the business hereby confirm y company or an appropriate of the principle of the principle of the principle of the princed of the principle of t	es office of ned that the s otherwise name of signs	the reg	istered (3) d in

Signature of Registered Agent