16 0000 57581

(Requ	iestor's Name)					
(Addı	ess)					
(Addr						
(City/	State/Zip/Phone #)					
PICK-UP	WAIT MAIL					
(Busi	hess Entity Name)					
(Document Number)						
Certified Copies	Certificates of Status					
Special Instructions to Filing Officer:						
	Office Use Only					



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04/29/19--01001--015 **25.00

2019 APR 29 PH 4: 25

APPROVED AND FILED

T GLASS

MAY 08 2019

COVER LETTER

TO: Registration	 Section Corporations		•	
Division of	Corporations			
SUBJECT: Whole	e Grain Harmony LLC			
30BJECT	Name of Limi	ited Liability Company	_	
Dear Sir or Madam:				
Dear Sir Or Madam.				
The enclosed Regist	ered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.		
Please return all cor	 respondence concerning this matter t	to the following:		
Carol A Prihoda,	memher			
	<u> </u>			
	Name of Person			
Whole Grain Har	mony LLC			
	Firm/Company		201	
	TimeCompany	.· 	-00 A	7
11161 East State	Road 70, #110-113		2019 APR 29 PM 4: 25	<u> </u>
-	Address		<u> </u>	后答
				0
Lakewood Ranch	ከ, FL 34202		C' 	·
	City/State and Zip Code		25	
carol.prihoda@o	 utlook.com			
	(to be used for future annual report	(notification)		
For further informat	ion concerning this matter, please ca	III:		
Carol A Prihoda,	member 81	5 (353-0188		
Nan	at (at (at (at (at (at (at (at (at (_at (Area Code & Daytime Telephone Num	nber	
STDE ET/C	 	MAILING ADDRESS.		
Registration		MAILING ADDRESS: Registration Section		
Division of	Corporations	Division of Corporations		
Clifton Buil		P.O. Box 6327		
	tive Center Circle	Tallahassee, Florida 32314		
	Florida 32301			
Enclosed is	a check for the following amount:			
\$25 Filin	J g Fee	☐ \$55 Filing Fee & Certified Copy		
INHS18 (2/14)				

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.

I. Na	ame of the fim	Uhole Grain F	łarmony L	LC	
2. (a)		t State Road 70	(b)		
(,		al office address of limited liability company: **Total Company of the Company o	_ (0)		s of limited liability company: **BE POST OFFICE BOX**)
	unit #110-	113			
	Lakewood	Ranch, FL 34202	- —		
	3/21/2016		L16	8000057581	
3.	Date	of filing/registration in Florida	4.	Document r	ıumber
5. (a)	URS Ager	its LLC			
v. (u)	Registered Age:	nt and Registered Office shown on the records of th	e Florida Depi	t. of State:	
	3458 Lake	shore Dr.			
	Registered Offi	ce Address (MUST BE FLORIDA STREET A)	DDRESS)		
	Tallahass	 	32312		2019
(b)	Carol A Pri	 ihoda, member !-			AH FIL 2019 APR 29 SWECKHARS
	Enter name of 2	EW Registered Agent and/or NEW Registered (Office address:	:	29 ≧
	11161 Eas	st State Road 70			PH E
	NEW Registere	ed Office Address:			# 2
	unit #110-	113			
	Lakewood	RanchFL	34202		
the cha agent w was/we the arti	inge or change will be identicated are authorized cles of organi	y company is not organized under the laws are made, the Florida street address of tal. Or, in the case of a Florida limited liaby an affirmative vote of the members of zation or the operating agreement of the liable. Mentuck	he registered oility compa the limited	d office and the bus ny, it is hereby con liability company o	siness office of the registered firmed that the change(s) or as otherwise provided in
provisi the obli to merc	by accept the cons of all stati igations of my ilv reflect a cl I'm writing of	appointment as registered agent and agre- tites relative to the proper and complete p position as registered agent as provided lange in the registered office address, I he lithis change.	e to act in the erformance for in Chap ereby confir.	his capacity. I furth of my duties, and I ter 605, F.S. Or, if m that the limited li	ner agree to comply with the am familiar with and accept this document is being filed ability company has been

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

nember