

L16000135362

1/3/2018

Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.
Account Number : 120090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

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LLC REGISTERED AGENT CHANGE
NATURAL NUTRITION LLC

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**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. Name of the limited liability company: NATURAL NUTRITION LLC
2. (a) 417 4TH ST N APT 101
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
ST. PETERSBURG, FL 33701
- (b) 417 4TH ST N APT 101
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
ST. PETERSBURG, FL 33701

3. 07/19/2016
Date of filing/registration in Florida
4. L16000135362
Document number

5. (a) LEGACY HOLDINGS INVESTMENT GROUP LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1915 WEST ORIENT STREET
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

TAMPA, FL 33607

- (b) Registered Agents Inc.
Enter name of NEW Registered Agent and/or NEW Registered Office address:

3030 N. Rocky Point Dr.
NEW Registered Office Address:

STE 150A
Tampa, FL 33607

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Riley Park
Signature of a member or authorized representative of a member Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Bill Havre Bill Havre - Assistant Secretary
Signature of Registered Agent