

L16000 141410

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

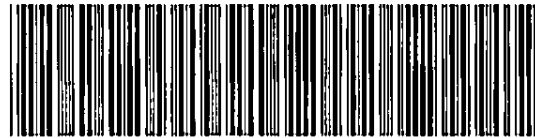
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 29, 2018

MARTHA THERAN
11910 SW 12TH CT
DAVIE, FL 33325

SUBJECT: FIT ME FOOD, LLC
Ref. Number: L16000141410

We have received your document for FIT ME FOOD, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 318A00022237

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fit ME Food LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Martha Theran

Name of Person

Fit ME Food LLC

Firm/Company

11910 SW 12TH CT

Address

Davie, FL 33325

City/State and Zip Code

mtheran13@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Martha Theran

at (_____) 954.274.0574

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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: Fit Me Food LLC
2. (a) 11910 SW 12TH CT. Davie, FL33325 (b) 11910 SW 12TH CT. Davie, FL 33325
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. July 27, 2016 4. L16000141410
Date of filing/registration in Florida Document number

5. (a) Martha Theran
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

11910 SW 12TH CT, Davie, FL 33325

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

11910 SW 12TH CT

Davie, FL 33325

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

NEW Registered Office Address:

11910 SW 12TH CT

Davie, FL 33325

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.

Martha Theran
Signature of a member or authorized representative of a member

Martha Theran

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.

Martha Theran
Signature of Registered Agent