

LI0000230027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

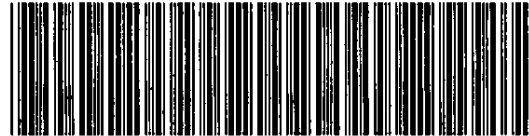
(Business Entity Name)

(Document Number)

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2018 APR 30 AM 10:10
STATE OF TEXAS
COMPTROLLER OF PUBLIC ACCOUNTS

MAY 01 2018
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IFOAM FWB 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:

Julie Marino
Name of Person

IFOAM FWB LLC
Firm/Company

104 Memorial Pkwy SW Suite 8
Address

Pt. Walton Beach / FL / 32548
City/State and Zip Code

julie@sprawifoam.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julie Marino at (850) 226-4164
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2018

JULIE MARINO
104 MEMORIAL PKWY STE 8
STE 8
FORT WALTON BEACH, FL 32548

SUBJECT: IFOAM FWB, LLC
Ref. Number: L16000230027

We have received your document for IFOAM FWB, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

The registered agent must sign accepting the designation.

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 218A00007527

RECEIVED BY THE STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2018 APR 30 AM 10:10

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RECEIVED

2018 APR 30 PM 2:32

REGISTRATION
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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: IFOAM FWB LLC

2. (a) 104 Memorial Pkwy Sw Ste 8 (b) _____

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

Fort Walton Beach, FL 32548

12/21/16

L16000230027

3. Date of filing/registration in Florida

4. Document number

5. (a) Julie ~~Marino~~ Tuttle
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

104 Memorial Pkwy Sw Ste 8
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

~~Fort Walton Beach, FL~~
Fort Walton Beach, FL 32548

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

104 Memorial Pkwy Sw Ste 8
NEW Registered Office Address:

Fort Walton Beach, FL 32548

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2018 APR 30 AM 10:10

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.

[Signature]
Signature of a member or authorized representative of a member

ANDREW J. BLUMEST
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.

Julie Marino
Signature of Registered Agent