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(Re	equestor's Name)					
(Address)						
(Ad	dress)					
(
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(D)	uningga Entity No.	ma)				
(Business Entity Name)						
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TO TAK IZ MITTE STATE NOOF AHASSEE, FLORID.

STATE OF THE STATE

S. WARREN

MAR 1 3 2018

COVER LETTER

	vision of Corporations	•			
SUBJECT	Second Nature/Sweat, LLC	JV1			
CODUTE		e of Limited Liability Company			
Dear Sir or	Madam:				
The enclos	ed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.			
Please retu	rn all correspondence concerning thi	s matter to the following:			
Makiah S	Sweat Fox				
	Name of Person				
Second I	Nature/Sweat, LLC JV1				
	Firm/Company				
P.O. Box	30563				
	Address				
Pensaco	la, FL 32503				
	City/State and Zip Code				
makiahrs	sweat@gmail.com				
E-ma	il address: (to be used for future ann	ual report notification)			
For further	information concerning this matter,	please call:			
Makiah F	Fox	850 549-7649			
	Name of Person	Area Code & Daytime Telephone Number			
Re Di ⁱ Cli 260	gistration Section vision of Corporations ifton Building 61 Executive Center Circle llahassee, 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			
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.

1.	Na	me of the limited liability company: Second Natur	e/Sweat,	LLC JV1		
2	(a)	2401 Executive Plaza	(b) 2401 Executive Plaza			
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0) _	-	limited liability company: E POST OFFICE BOX)	
		Suite 7		Suite 7		
		Pensacola, FL 32504	F	ensacola, FL 3250	4	
		December 30, 2016	L1	7000000829		
3.		Date of filing/registration in Florida	4.	Document nur	mber	
5	(a)	Donald Sweat				
٥.	(4)	Registered Agent and Registered Office shown on the records of t	the Florida De	pt. of State:		
		2401 Executive Plaza			₩ =	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			AND AND THE	
		Suite 7				
		Pensacola, FL	32304		FILTED IN 12 AH IN SU AND OF STATE IN AND OF STATE IN AND SEE FLORID	
	(b)	Roger Williams			E ST E	
	(17)	Enter name of NEW Registered Agent and/or NEW Registered Office address:		55:		
		6901-A North 9th Ave				
		NEW Registered Office Address:	_			
		Suite 246				
		Pensacola ,FL	32504			
the age was the	e cha ent v s/we e arti Signa herei visi e obl mere	imited liability company is not organized under the law ange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liable and an affirmative vote of the members of cles of organization or the operating agreement of the wave of a member or authorized representative of a member by accept the appointment as registered agent and agreement of statutes relative to the proper and complete in the proper and complete in the proper and complete in the registered agent as provided by reflect a change in the registered office address, I in writing of the change.	the register ability complete the limite limited liab	red office and the busine bany, it is hereby confir d liability company or a pility company. The Sweat Fox Printed or typed This canacity I further	ess office of the registered med that the change(s) is otherwise provided in mame of signee	
Si		re of Registered Agent				

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