Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000132735 3)))



H190001327353ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC REGISTERED AGENT CHANGE SEEDEX UNLIMITED LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY $\ref{eq:limited}$

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	me of the limited liability company: Seed	ex Unlimited LLC		
2. (a)	Seedex Unlimited LLC	(b) See	edex Unlimited LLC	
2. (a)	Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	pany:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 8805 Tamiami Trail North, Suite 372 Naples, FL 34108 L17000000928	
	7901 4th St N, STE 300	880		
	St. Petersburg, FL 33702	Nap		
	December 30, 2016	L17		
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)				
). (u)	Registered Agent and Registered Office shown on the re	ecords of the Florida Dept (of State:	
	Future Substrates Inc.			
	Registered Office Address (MUST BE FLORIDA S	STREET ADDRESS)		
	7225 Pelican Bay Blvd. #1905		 : . . •	
	Naples	, FL_34108	To Company	
		, £L		
a.s			23 [7]	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW R</u>	egistered Office address:		
	Registered Agents Inc.		2E 5	
	NEW Registered Office Address:		<u> </u>	
	7901 4th St N, STE 300			
	St. Petersburg	, FL 33702		
the changent was/we the arti	imited liability company is not organized underinge or changes are made, the Florida street ad will be identical. Or, in the case of a Florida litere authorized by an affirmative vote of the medicles of organization or the operating agreement of a member of a member or authorized representative of a memb	dress of the registered mited liability compan embers of the limited li nt of the limited liabilit	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.	
_			·· -	
provisi the obl to mer notifie	by accept the appointment as registered agent ions of all statutes relative to the proper and consistency of my position as registered agent as elv reflect a change in the registered office add to writing of this change.	and agree to act in thi omplete performance of provided for in Chapte dress, I hereby confirm	s capacity. I further agree to comply with the of my duties, and I am familiar with and acceper 605, F.S. Or, if this document is being filed that the limited liability company has been	
Signatu	ire of Registered Agent			