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COVER LETTER

Division of Corporations	
SUBJECT: MAMA-DEW FARMS, LLC	
	ed 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:
STACY BIEDRZYCKI RENDUELES, Esq.	
Name of Person	
STACY BIEDRZYCKI RENDUELES, P.A.	
Firm/Company	
2047 OSPREY LANE, SUITE C	
Address	·
LUTZ, FL 33549	
City/State and Zip Code	
STACY@RENDUELESLAW.COM	· · · · · · · · · · · · · · · · · · ·
E-mail address: (to be used for future annual report r	otification)
For further information concerning this matter, please call	
STACY BIEDRZYCKI RENDUELES 813	948-7377
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 Enclosed is a check for the following amount:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
₩ \$25 riling ree	\$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.

l. Na	ame of the limited liability company: MAMA-E	DEW FAR	MS	, LLC	
2. (a)	1196 N.E. 98TH STREET		(b)	1196 N	I.E. 98TH STREET
	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny:	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MIAMI SHORES, FL 33138			MIAMI S	SHORES, FL 33138
•					
	06/12/2017		l	_170001:	27609
3.	Date of filing/registration in Florida	4.	_	-	Document number
5. (a)	NANCY GUDE PUMO				
	Registered Agent and Registered Office shown on the reco	rds of the Flor	rida I	Dept. of State	te:
	1196 N.E. 98TH STREET				
	Registered Office Address (MUST BF FLORIDA STR	EET ADDRE	(SS)		_
					_
	MIAMI SHORES	_{. FL} 3313	38		. •
		_, , , , , , , , , , , , , , , , , , ,			- <u>i</u> .
(b)	STACY BIEDRZYCKI RENDUELES, Esq.				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	stered Office	<u>addr</u>	ress:	<u> </u>
	STACY BIEDRZYCKI RENDUELES, P.	Α.			
	NEW Registered Office Address:				-
	2047 OSPREY LANE, SUITE C				: 0
				· · · · · · · · · · · · · · · · · · ·	-
	LUTZ	_{. FL} 3354	9		
agent w was/wei the artic Signate I hereb provision the obligation merel notified	mited liability company is not organized under the registered agent and the registered agent and company as for the authorized by an affirmative vote of the members of a registered agent and the authorized representative of a member of a member authorized representative of a member of a member authorized representative of a member of all statutes relative to the proper and compations of my position as registered agent as professions of my position as registered agent as professions of this change.	ss of the reged liability pers of the limited	gisto con imite d lia	pred office pany, it is ed liability com	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in a pany Printed or typed name of signee