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(Requestor's Name)			
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(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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## **COVER LETTER**

TO:

NHS18 (2/14)

Registration Section

Division of Corporations		
SUBJECT: <u>Battle Lamb</u> (	Organics LLC of Limited Liability Company	FEI/IEN # 82-3231126
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for	r filing.
Please return all correspondence concerning this		<b>6</b> -
Rachel Troyer Name of Person		
Battle Lamb Organics C	L C	
1645 Fernando Drive Address		
Tallahassee, FC City/State and Zip Code		
Dattle amborganics @ am E-mail address: (to be used for future amua	Cail. Com I report notification)	
For further information concerning this matter, ple	ease call:	
Rachel Troyer Name of Person	at ( <u>808</u> ) <u>343-3919</u> 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 an	nount:	
\$25 Filing Fee	☐ \$55 Filing Fee & Certified	I Сору

## 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

1. N	ame of the limited liability company:Battle Lanb Occ	panics LLC
	Principal office address of limited liability company: 32303  (Note: MUST BE STREET ADDRESS)	
		N (
	1645 Fernando Dr. Tallanguez, FC 32303 1	645 Fernando Or. Tallahavee FC 3230
3.	Date of filing/registration in Florida  4.	7000222773 Document number
5. (a)	Legal Inc Corporate Persons (Kyle Lavender) Registered Agent and Registered Office shown on the records of the Florida Dept. of	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	Fort Myers, FL 33907	
	,	—- ∵
(b)	Rachel Troyer	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	10451 Fesh and Dakel Ba	Will Company of the C
	NEW Registered Office Address:	
	1645 Fernando Prive	
	Tallahavee ,FL 32303	<del></del> _
gent w	mited liability company is not organized under the laws of the State of nge or changes are made, the Florida street address of the registered of vill be identical. Or, in the case of a Florida limited liability company, are authorized by an affirmative vote of the members of the limited liability of the operating agreement of the limited liability of the operating agreement of the limited liability of the limited liab	fice and the business office of the registered it is hereby confirmed that the change(s)
Simot		Rachel Troyer Printed or typed name of signee
herel ovisie e obli mere tified	we of a member of authorized representative of a member by accept the appointment as registered agent and agree to act in this constant of all statutes relative to the proper and complete performance of a gations of my position as registered agent as provided for in Chapter by reflect of chapter in the registered office address, I hereby confirm the in writing of this change.  The of Registered Agent	