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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.\*\*

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## LLC REGISTERED AGENT CHANGE **BURGESS BRANDS LLC**

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## 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. Ni	nme of the limited liability company: Burgess	Brands	s LLC	· ·		
2. (a)	352 RAMSEY RD	(h) 3	(b) 352 RAMSEY RD			
2. (11)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			failing address of limited liat (Note: MAY BE POST OF		
	YARDLEY, PA 19067	<u> </u>	YARDLEY, PA 19067			
	11/16/2017		170002	236665		
3.	Date of filing/registration in Florida	4,		Document number		
	ACENTS AND CORPORATIONS INC					
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida De	pt. of State	:		
	300 5TH AVE S STE 101-330		•			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	NAPLES E	34012			•	
	NAP LLS F	,04012	<del></del>		•	
(b)	Registered Agents Inc.				ت	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office addre	<u>ss</u> :		- +5+	
	7001 4th Ct N					
	7901 4th St N				- ·	
	NEW Registered Office Address:					
	STE 300				2	
	St. Petersburg	33702				
the ch agent was/w the art Signa	limited liability company is not organized under the latange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited latere authorized by an affirmative vote of the members icles of organization or the operating agreement of the attraction of a member or authorized representative of a member.	f the registe inbility com of the limited link limited link Riley	red office pany, it is d liability pility com Park	and the business offices hereby confirmed that y company or as otherwapany.  Printed or typed name of signature of signature in the confirmed or typed name of signature in the confirmed in the confirme	the registered the change(s) ise provided in	
provis the ob to mer notifie	thy accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided in writing of this change.  Bill Havre - Assistate	e performan ed for in Che	ce of my c apter 605 (irm that i	tuties, and Lam familia . F.SOr. if this docum	r with and accept ent is being filed	
Signati	ure of Registered Agent					