

L180000810Z5

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

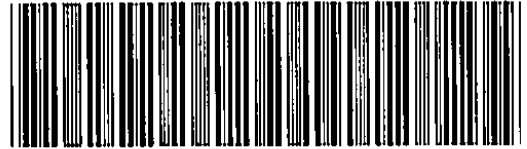
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



30033433654

09/20/19--01004--019

2019 OCT -2 PM 2:25

Y SULKER

OCT 03 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Byo Holdings LLC
Name of Limited 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:

Veronica Solis
Name of Person

Byo Holdings, LLC
Firm/Company

900 South US one Ste 105
Address

Jupiter, FL 33477
City/State and Zip Code

VERONICA.SOLIS@beyondorganiconutritionals.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VERONICA SOLIS at (561) 290-9826
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

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

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
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 Florida.

1. Name of the limited liability company: Byo Holdings, LLC

2. (a) 5490 CR 333 (b) 5490 CR 333

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

Koshkonong, MO 65692

Koshkonong, MO 6

3. 4/2/18
Date of filing/registration in Florida

4. L18000081025
Document number

5. (a) Duke, Kenneth JR
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

924 Pompano Drive
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Jupiter, FL 33458
FL

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

900 South Us One
NEW Registered Office Address:
Ste 105

Jupiter FL 33477

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Veronica Solis
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has notified in writing of this change.

[Signature]
Signature of Registered Agent

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

2019 OCT -2 PM 2:55