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## LLC REGISTERED AGENT CHANGE NATE'S GOOD BARBEQUE LLC

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P.002/002

## 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 statement in order to change its registered office or registered agent, or both, in the State of

	ame of the limited liability company: NATES GOO						
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  411 THOR AVE SUITE 202 SE	_ (	b)	Mailing address of limite (Nate: MAY BE POS	-	-	•
	PALM BAY SE, FL 32909	<b>-</b>					
	07/24/2018		L1800	00177960			
3.	Date of filing/registration in Florida	4.		Document number			_
5 /s	LEGALING CORPORATE SERVICES INC.						
5. (a	Registered Agent and Registered Office shown on the records of t	he Florid	la Dept. of	/ State:			
	5237 SUMMERLIN COMMONS BLVD STE	400					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<del></del>		2	
						019	
	FORT MYERS,FL	33907	7			2019 MAY	
(b)	ROCKET LAWYER CORPORATE SERVICES LLC					-S	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		<del></del>	1	P		
	155 OFFICE PLAZA DRIVE, 1ST FLOOR				-	12: 16	
	NEW Registered Office Address:	•		<del></del> .		•	
	TALLAHASSEE	32301	<u> </u>	<del></del>			
the chagent was/w the ar	limited liability company is not organized under the law sange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liavere adthorized by an affirmative vote of the members of ticles of organization of the operating agreement of the address of a member of authorized representative of a member or authorized representative of a member of all statutes relative to the proper and complete	the reg shility of the limited  JE:	istered of company mited lia liability SSICA S	office and the business of it is hereby confirmed bility company or as othe company.  SCHOLL, AUTHORIZED Printed or typed name canacity. I further agree	office of that the cherwise posterior of signee	the reg change provide SENT.	gistered e(s) ed in ATIVE
nouju	tions of all statutes relative to the proper and complete ligations of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change.  TOTAL SCORE TO ME WIFE OFFICE A MEDITAL REGISTERED Agent	d för in iereby (	Chapter confirm	· 605, F.S. Or, if this do that the limited liability	cument i company	is bein v has l	g filéd been

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

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