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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Beyond Organic Henrela J Name of Limited Liability Compa	ny LC
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are sub-	nitted for filing.
Please return all correspondence concerning this matter to the following:	
Name of Person	
Beyord Organi Harefacteury,	LLC
900 South US One 52 105 Address	
Jupiter FL 33477 City/State and Zip Code	
Vernica Solis (a) beyond Organic no E-mail address: (to be used for future addual report notification)	tutionals, com
For further information concerning this matter, please call:	
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 ADD Registration Section Division of Corporations Division of Corporations Tallahassee, Florida 32301	on orations
Enclosed is a check for the following amount:	

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

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.

I. Na	ame of the limited liability company:	encl ()	you	c Harufacte	erny LLCo
2. (a)	5490 CR 333	(b)	549	90CR 333	3 /
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liab (Note: MAY BE POST OF	
	Kushkonens, HD (05/092		Kosl	nk mong, MO	<u>(05692</u>
3.	S 24 18 Date of filing/registration in Florida			1800207 Document number	304
5. (a)	Dulle Kenneth JR				
	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of Stat	te:	
	924 Pompano Dura	2		_	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS,	!		
				_	
	Tupiter	FL 33	458	4	701
			·	-	[" ! 1 2019 SEP
(b)	Enter name of NEW Registered Agent and/or NEW Register	 		_	(-)
	inter name of NEW Registered Agent and/or NEW Register	<u>ed Office add</u>	ress:		<u>ن</u> ن
	900 South Us one.				
	NEW Registered Office Address:			_	ب ب
	Ste 10's				5
		<u> </u>		_	
	Jupiter	FL <u>33</u>	チチ	_	
If the 1	t imited liability company is not organized under the l	laws of the	State of Fl	orida, it is hereby confirm	ned that after
the cha	nge or changes are made, the Florida street address of the control of the case of a Florida limited	of the regis	tered offic	e and the business office	of the registered
was/we	ere authorized by an affirmative vote of the members	s of the limi	ted liabilit	ty company or as otherwis	
tne arti	cles of organization or the operating agreement of the	ne limited li	-		
Signa	are of a member or authorized representative of a member		Veres	Printed or typed name of sign	nee
l herei provisi the obl to mere notified	by accept the appointment as registered agent and a cons of all statutes relative to the proper and completigations of my position as registered agent as providity reflect a change in the registered office address, in writing of this change.	gree to act le performa ded for in C I hereby co	in this cap ince of my hapter 60: nfirm that	oacity. I further agree to duties, and I am familiar 5, F.S. Or, if this docume the limited liability comp	comply with the with and accept ent is being filed any has been
Signatu	re of Registered Agent				