

L18000252030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

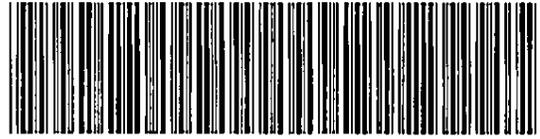
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100320982941

11/19/18--01014--029 \*\*25.00

STATE OF MISSISSIPPI  
FACULTY SERVICE DIVISION

2018 NOV 19 PM 1:23

FILED

REC 10 2018  
NOV 19 2018

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Absolute Baking 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:

Sarah Rose Lownes

Name of Person

Absolute Baking LLC

Firm/Company

700 NE 4th Ave

Address

Pompano Beach, FL 33060

City/State and Zip Code

Absolutebakingllc@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sarah Rose Lownes 484 796 3374  
Name of Person at ( ) 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

2018 NOV 19 PM 1:28  
FILED  
OFFICE OF THE STATE  
CLERK OF FLORIDA

**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. Name of the limited liability company: Absolute Baking LLC  
700 NE 4th Ave, Pompano Beach, FL 33060  
 2. (a) Principal office address of limited liability company: (b) Mailing address of limited liability company.  
*(Note: MUST BE STREET ADDRESS)* *(Note: MAY BE POST OFFICE BOX)*

10/26/2018  
 3. Date of filing/registration in Florida 4. Document number

5. (a) Strategic Tax Consulting INC  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1700 66th ST N Suite 209  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
St Petersburg, FL 33710

FILED  
 2018 NOV 19 PM 1:28  
 TALLAHASSEE, FLORIDA  
 STATE DEPARTMENT OF REVENUE

Sarah Rose Lownes  
 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  
700 NE 4th Ave  
NEW Registered Office Address:  
Pompano Beach, FL 33060

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after 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(s) 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.

Sarah Rose Lownes  
 Signature of a member or authorized representative of a member 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 accept 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 been notified in writing of this change.*  
Signature of Registered Agent