

L18 000 252 133

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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MAY 26 2020

ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Boca Food Market 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:

JOHN ACIERNO

Name of Person

BOCA Food MARKET LLC

Firm/Company

4409 NORTH LAKE BLVD

Address

PALM BEACH GARDENS, FL 33410

City/State and Zip Code

john@josephsclassicmarket.com

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

For further information concerning this matter, please call:

JOHN ACIERNO

Name of Person

at (561) 799-3302

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



2020 APR 03 PM 11:43

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 7, 2020

JOHN ACIERNO
4409 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410

SUBJECT: BOCA FOOD MARKET LLC
Ref. Number: L18000252133

We have received your document for BOCA FOOD MARKET LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PROFIT CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 020A00007455

Please see attached - 5/21/2020

**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: BOCA FOOD MARKET LLC
2. (a) 6000 GLADES ROAD # 1380A
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
BOCA RATON, FL 33486
- (b) 4409 Northlake Blvd. Palm Beach
Mailing address of limited liability company: GAR
(Note: MAY BE POST OFFICE BOX) FL 3
3. 10/29/2018
Date of filing/registration in Florida
4. L18000252133
Document number
5. (a) ANTHONY DiBENEDETTO
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
4409 NORTHLAKE BLVD. PALM BEACH GAR, FL 33410
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

_____, FL _____
- (b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:
JOHN ACIERNO
NEW Registered Office Address:
4409 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410

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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.

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

JOHN ACIERNO
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]
Signature of Registered Agent