

L1900006690Z

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
19 APR 22 AM 8:19

RA Change

MAY 03 2019

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Food Code Academy  
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:

Arthur Stoeke  
Name of Person

Food Code Academy  
Firm/Company

1958 Mikler Rd.  
Address

Oviedo, FL. 32765  
City/State and Zip Code

artie @ foodcodeacademy.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Artie Stoeke at ( 321 ) 432-1600  
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

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19 APR 22 AM 8:19

**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: Food Code Academy

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

87 Calcutta Court  
Indianapolis, FL 32903

MARCH 8<sup>th</sup>, 2019

3. Date of filing/registration in Florida

L19000066902

4. Document number

5. (a) Julien L. Meyer  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

87 Calcutta Court  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

87 Calcutta Court  
Indianapolis, FL 32903

(b) \_\_\_\_\_  
Enter name of NEW Registered Agent and/or NEW Registered Office address.

Arthur Stoeke  
NEW Registered Office Address:

1958 Mikler Rd.

Oviedo, FL 32765

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 APR 22 AM 10:10  
Tallahassee  
Please change  
both principal office  
to this address  
Tallahassee

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 of a member or authorized representative of a member

Arthur L. Stoeke Jr.  
Printed or typed name of signer

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