

L19 000107258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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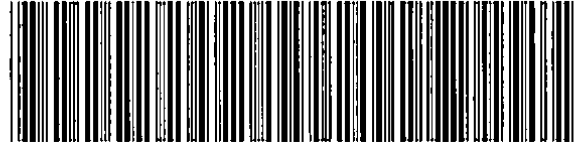
(Business Entity Name)

(Document Number)

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2019 AUG 14 PM 12:19  
SECRETARY OF STATE  
TALLAHASSEE FL 32301

AUG 21 2019  
C:10:00:00

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: FRUITSNOW, LLC
2. (a) 1963 NE 6 ST, DEERFIELD BEACH, FL 33441 (b) 265 S. FEDERAL HWY, SUITE 150 DEERFIELD BEACH FL 334  
Principal office address of limited liability company: 33441 Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 4/19/19 Date of filing/registration in Florida 4. L19000107258 Document number

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

RESIGNED

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

- (b) NANCY LOFT  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

265 SOUTH FEDERAL HWY,

NEW Registered Office Address:

SUITE #150

DEERFIELD BEACH, FL 33441

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.

Nancy Loft  
Signature of a member or authorized representative of a member:

NANCY LOFT  
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.

Nancy Loft  
Signature of Registered Agent

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