

h20 000233587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

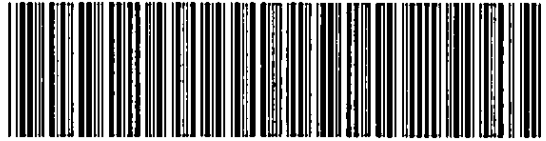
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*[Signature]*



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22 DEC 15 AM 4:25  
RECEIVED STATE CLERK



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 30, 2022

BROOKE BURLEIGH  
175 POINCIANA LANE  
DELTONA, FL 32738

SUBJECT: GO BURLEE LLC  
Ref. Number: L20000233587

We have received your document for GO BURLEE 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 CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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

Michael A Hall  
OPS Clerk

Letter Number: 822A00026366

22 DEC 15 AM 4: 25

Division of Corporations

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Go Burlee 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:

Brooke Burleigh  
Name of Person

Go Juice  
Firm/Company

175 Poinciana Lane  
Address

Deltona FL 32738  
City/State and Zip Code

DEC 15 2022

debarye@gojuice.co  
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Brooke Burleigh at ( 386 ) 279-5763  
Name of Person 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

22 DEC 15 AM 4:25

**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: Go Burlee LLC

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)

175 Poinciana Lane  
Deltona FL 32738

3. 8/4/2020 4. L 20000233587  
Date of filing/registration in Florida Document number

5. (a) United States Corporation Agents, Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
5575 S. Semoran Blvd 36  
Orlando FL 32822

(b) Brooke Burleigh  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:  
175 Poinciana Lane  
Deltona FL 32738

22 DEC 15 AM 4:25  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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.

Brooke Burleigh  
Signature of a member or authorized representative of a member

Brooke Burleigh  
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.

Brooke Burleigh  
Signature of Registered Agent