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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ORLANDO SMART SNACKS 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:

William H. Miller

Name of Person

ORLANDO SMART SNACKS LLC

Firm/Company

6031 Margie Ct.

Address

ORLANDO, FL 32807

City/State and Zip Code

WILLIAMMILLER.WM@GMAIL.COM

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

For further information concerning this matter, please call:

William H. Miller

Name of Person

at ( 407 ) 963-2946

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

**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: ORLANDO SMART SNACKS LLC

2. (a) 15502 Stonybrook West Pkwy (b) 15502 Stonybrook West Pkwy

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

Ste 104-584  
Winter Garden FL 34787

Ste 104-584  
Winter Garden FL 34787

3. August 19, 2019  
Date of filing/registration in Florida

4. L20000256452  
Document number

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

7901 4th Street North  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Ste 300  
St. Petersburg, FL 33702

(b) William H. Miller JR.  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

6031 Margie Ct.  
**NEW Registered Office Address:**

6031 Margie Ct.

ORLANDO, FL 32807

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

William H. Miller 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]  
Signature of Registered Agent

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