L20000271540

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
iumils

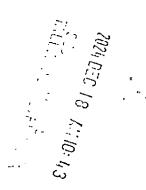




700439037677

2024-DEC 18 PM 3: 36

FROSIVED



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12	000000195				
REFERENCE : 84	0068 7681421				
AUTHORIZATION :					
COST LIMIT : \$	25.0				
ORDER DATE : December 16, 2024					
ORDER TIME : 12:03 PM					
ORDER NO. : 840068-028					
CUSTOMER NO: 7681421					
CHANGE OF AGENT					
NAME: BOD BRANDS MARKETING LLC					
PLEASE RETURN THE FOLLOWING AS PROOF	OF FILING:				
CERTIFIED COPY PLAIN STAMPED COPY					
CONTACT PERSON: Amanda Miller EX	Т#				

EXAMINER: _______

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. Na	ame of the limited liability company: BOD BRANI	DS MARKETING	LLC	
2. (a)		(b)		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		_	ess of limited liability company: 4Y BE POST OFFICE BON
	281 W TROTTERS DRIVE	18	00 PEMBROOK I	DRIVE STE 280
	MAITLAND, FL 32751		AITLAND, FL 328	10
	09/01/2020	L20	0000272540	
3.	Date of filing/registration in Florida	4.	Documen	t number
<i>د</i> (م)				
5. (a)	Registered Agent and Registered Office shown on the record	ls of the Florida Dep	t. of State:	20
	ASSURED COMPLIANCE SERVICES, LLC	•		2024 DEC TÄLLÄAT
	Registered Office Address (MUST BE FLORIDA STRE	EET ADDRESS)		
	1615 WOODWARD STREET			- -
	ORLANDO	. FL ³²⁸⁰³		7.110: 1,3
		, i is		ر. - د
(b)				$arphi_{i}$, $ec{\omega}$
	Enter name of NEW Registered Agent and/or NEW Register	ered Office address	;	
	Corporation Service Company			
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee	n 32301		
		, I ^r L,		
change agent v was/w	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limitedere authorized by an affirmative vote of the member icles of organization or the operating agreement of	the registered of d liability compa ers of the limited	fice and the busin ny, it is hereby co liability company	ness office of the registered on firmed that the change(s)
/s/ P	hilip K. Calandrino	Philip K.	Calandrino, Auth	orized Person
Signa	ture of a member or authorized representative of a member	· · · · · · · · · · · · · · · · · · ·	Printed or t	yped name of signee
provisi the obl to mer	by accept the appointment as registered agent and ions of all statutes relative to the proper and compl ligations of my position as registered agent as prov ely reflect a change in the registered office address d in writing of this change.	agree to act in the lete performance ided for in Chap s, I hereby confir.	nis capacity. I fur of my duties, and ter 605, F.S. Or, in that the limited	ther agree to comply with the I am familiar with and accept if this document is being filed liability company has been
Signatu	Inace Cokubly Ire of Registered Agent	GRACE E. KIR	BY, ASST. VICI	E PRESIDENT