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(Requestor's Name)							
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PICK-UP WAIT MAIL							
(Business Entity Name)							
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Office Use Only

COVER LETTER

TO:	Registration Section Division of Corporations	•
SUBJ	OUR ROOTS PRODUCTS LLC	
.,01,,	ECT: Name of Limite	d Liability Company
Dear S	Sir or Madam:	
The er	nclosed Registered Agent/Registered Office Change a	and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to t	the following:
ALEJ/	ANDRA P PRADA CARMONA	
	Name of Person	
OUR F	ROOTS PRODUCTS LLC	
	Firm/Company	
157 NI	COLE LN	
	Address	
CRES	TVIEW, FL 32539	
	City/State and Zip Code	
ourroo	tsproducts@gmail.com	
<u> </u>	-mail address: (to be used for future annual report no	otification)
For fu	rther information concerning this matter, please call:	
ALEJA	ANDRA P PRADA CARMONA 850	737-7772
	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

INHS18 (2/14)

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.

me of the limited liability company: OUR	ROOTS PROD	OUCTS LLC	JCTS LLC		
ALEJANDRA P PRADA CARMONA		(b) 157 NICOLE LN , CRESTVIEW, FL 32539			
(Note: MUST BE STREET ADDRES		(0)	-	ss of limited liability company: Y BE POST OFFICE BOX)	
15/ NICOLI; LN					
CRESTVIEW, FL 32539				·	
		L210001	137561		
Date of filing/registration in Floric	ia	4.	Document	number	
APRII. 2 2021					
Registered Agent and Registered Office shown on th	ne records of the	Florida Dept. of	State:	2021	
LYDIA L SALVADOR				DEL JUH TO	
Registered Office Address (MUST BE FLORID	A STREET AD	DRESS)			
515 PHEASANT TRAIL					
CRESTVIEW	. FL ³²	536		2021 JUH 10 PH 1: 36	
ALEJANDRA P PRADA CARMONA				36 36	
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	V Registered Of	fice address:			
ALEJANDRA P PRADA CARMONA					
NEW Registered Office Address:					
157 NICOLE LN					
CRESTVIEW	FL ³²	536			
or changes are made, the Florida street add fill be identical. Or, in the case of a Florida are authorized by an affirmative vote of the	der the laws (ress of the rest limited liabil members of the	gistered office lity company, he limited liab nited liability o	and the busine it is hereby cor- oility company of company.	ess office of the registered afrimed that the change(s) or as otherwise provided in	
lejan ana stacka Can	<u>1110119</u>	ALEJANDR.			
•			•	ped name of signee	
ons of all statutes relative to the proper and gations of my position as registered agent c ly reflect a change in the registered office a	l complete per	formance of r	ny duties, and l	l am familiar with and accept	
	· · · · · · · · · · · · · · · · · · ·				
	ALEJANDRA P PRADA CARMONA Principal office address of limited liability of the interpretation in Florid APRIL 2 2021 Registered Agent and Registered Office shown on the LYDIA L SALVADOR Registered Office Address (MUST BE FLORID) 515 PHEASANT TRAIL CRESTVIEW ALEJANDRA P PRADA CARMONA Enter name of NEW Registered Agent and/or NEW ALEJANDRA P PRADA CARMONA Enter name of NEW Registered Agent and/or NEW Registered Office Address: 157 NICOLE LN CRESTVIEW CRESTVIEW CRESTVIEW mited liability company is not organized ur or changes are made, the Florida street addrill be identical. 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Or, in the case of a Florida limited liability company is not organized under the laws or changes are made, the Florida street address of the registered differentical of the members of the cless of organization or the operating agreement of the ling and the member of authorized by an affirmative vote of the members of the cless of organization or the operating agreement of the ling and the proper and complete perions of all statutes relative to the proper and complete perions of any position as registered agent as provided for the registered agent as provided for the registered agent as provided for the registered office address. There (Lingwriting of this chafter)	ALEJANDRA P PRADA CARMONA Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS) 157 NICOLE LN CRESTVIEW, FL 32539 L21000 Date of filing/registration in Florida 4. APRIL 2 2021 Registered Agent and Registered Office shown on the records of the Florida Dept. of LYDIA L SALVADOR Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 515 PHEASANT TRAIL. CRESTVIEW FL 32536 ALEJANDRA P PRADA CARMONA Enter name of NEW Registered Agent and/or NEW Registered Office address: ALEJANDRA P PRADA CARMONA Enter name of NEW Registered Address: 157 NICOLE LN CRESTVIEW FL 32536 mited liability company is not organized under the laws of the State of or changes are made, the Florida street address of the registered office dill be identical. 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Document APRIL 2 2021 Registered Agent and Registered Office shown on the records of the Florida Dept. of State: LYDIA L SALVADOR Registered Office Address S15 PHEASANT TRAIL CRESTVIEW ALEJANDRA P PRADA CARMONA Enter name of NEW Registered Agent and/or NEW Registered Office address: ALEJANDRA P PRADA CARMONA Enter name of NEW Registered Agent and/or NEW Registered Office address: 157 NICOLE LN CRESTVIEW FL ALEJANDRA P PRADA CARMONA Enter name of NEW Registered Agent and/or NEW Registered Office address: 157 NICOLE LN CRESTVIEW FL ALEJANDRA P PRADA CARMONA SEW Registered Office Address: 157 NICOLE LN CRESTVIEW ALEJANDRA P PRADA CARMONA NEW Registered Office address: 157 NICOLE LN CRESTVIEW ALEJANDRA P PRADA CARMONA ALEJANDRA P PRADA CARMONA MINITED CONTROL OF The Control of the limited liability company, it is hereby control of the limited liability company. ALEJANDRA P PRADA CARMONA Printed or by accept the appointment as registered agent and agree to act in this capacity. I furtions of all statutes relative to the proper and complete performance of my daties, and its registered agent as provided for in Chapter 605, F.S. Or. if the proper in the registered office address. I hereby confirm that the limited light of this chapter for the proper and complete performance of my daties, and its registered agent as provided for in Chapter 605, F.S. Or. if the proper in the registered office address. I hereby confirm that the limited light of the chapter of this chapter of the chapter of this chapter of the ch	

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