To: 18506176383 From: 14693173436 Date: 12/18/19 Time: 3:14 PM Page: 01/02

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 : (844)386-0178 Phone : (214)317-4754 Fax Number

••Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:_

LLC REGISTERED AGENT CHANGE LUCKY'S MARKET OF PLANTATION, LLC

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To: 18506176383 From: 14693173436 Date: 12/18/19 Time: 3:14 PM Page: 02/02 (((H190003648313)))

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. N	ame of the limited liability company:LUCKY'S	MARKET	OF PLANT.	ATION, LLC		
)			
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	(0	М	arling address of limit (Note: MAY BE POS		
	6328 MONARCH PARK PLACE SUITE 100		6328 MON/	ARCH PARK PLAC	E SUITE 100	
	NIWOT, CO 80503		NIWOT, CO	80503		
	06/16/2014		M14000	004255		
3.	Date of filing/registration in Florida	4.	<u> </u>	Document number		
5. (a						
5. (a	Registered Agent and Registered Office shown on the records CORPORATION SERVICE COMPANY	of the Florida	Dept of State.			
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS			2013	
	1201 HAYS ST.		-		 	
	TALLAHASSEE,	FL_32301				:
(b)	Enter name of NEW Registered Agent and/or NEW Register	ed Office ad	dress		()	
	LEGALING CORPORATE SERVICES INC.	_			'	
	NEW Registered Office Address					
	5237 SUMMERLIN COMMONS BLVD. SUITE 400					
	FORT MYERS	FL 33907				
Sign I her provite of to me notifi	limited liability company is not organized under the sec or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the Andrew T. Pillare and the T. Pillare The property of a member of authorized representative of a member as soons of all statutes relative to the proper and completely accept the appointment as registered agent and a stone of all statutes relative to the proper and completely reflect a change in the registered office address, each in writing of this change.	he registere liability ee s of the limited lim	ed office and ompany, it is nited liability liability compliew T. Pillari	the business offichereby confirmed company or as officially. Printed or typed name cap. I further agree	e of the register that the change herwise provide	ed in

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

INHS18 (2/14)

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