## M15000010333

(Re	equestor'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:					

Office Use Only



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APR 1 6 2020 S. YOUNG



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom ami.casper@cscglobal.com

Date: April 1, 2020

Order#: 237145-041

Re: HEALTHIER TALK, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Meghan Groom

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

## 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

1. N	ame of the limited liability company: HEALTHIER T	ALK, LLC				
2. (a)	702 CATHEDRAL STREET	(b)	14 WEST MT. VERNOR	ST MT. VERNON PLACE		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		-	lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	BALTIMORE, MD 21201		BALTIMORE, MD 21201		<u>.                                    </u>	
	12/28/2015		M15000010333			
3.	Date of filing/registration in Florida	4.	Document num	ber		
5. (a)	GRAU, AARON					
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State:			
	1617 S FEDERAL HWY, APT 412					
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		202(		
				2020 APR		
	DEERFIELD BEACH , FI	L <u>33062</u>		#555F	COLUMN TO SERVICE AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF T	
(h)	Corporation Service Company				] 5 [	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office add	ress:			
				Fr F		
	1201 Hays Street					
	NEW Registered Office Address:					
	Tallahassee , FI	L_32301				
the chagent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the authow Turner	of the registiability control of the limited li	ered office and the busines apany, it is hereby confirm ted liability company or as	ss office of the ned that the cha otherwise prov	registere nge(s)	
Signa	nature of a member or authorized representative of a member		Printed or typed no			
I here	by accept the appointment as registered agent and ageons of all statutes relative to the proper and complete ligations of my position as registered agent as provide the registered office address. It	ree to act e performa ed for in C	in this capacity. I further o	agree to comply	v with th ind acce eing file	

notified in writing of this change.

BY: Grace E. Kirby, Asst. Vice President ce Company