(Re	questor's Name)					
(Ad	dress)					
DA)	dress)	 				
(Cit	y/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL MAIL				
(Bu	siness Entity Name)					
(Do	cument Number)					
Certificates of Status						
epal Instructions to Film	ng Officer:	·				

Office Use Only



600401250016

RECEIVED

A. BUTLER

FEB = 2 2023

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195									
REFERENCE : 422592 8403186									
AUTHORIZATION: Spelle man									
COST LIMIT : \$ 25.00									
ORDER DATE : January 31, 2023									
ORDER TIME : 1:33 PM									
ORDER NO. : 422592-010									
CUSTOMER NO: 8403186									
CHANGE OF AGENT									
NAME: INTERNATIONAL DEHYDRATED FOODS, LLC									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CERTIFIED COPY XXX PLAIN STAMPED COPY									
CONTACT PERSON: Eyliena Baker									
EXAMINER'S INITIALS:									

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.

I. Na	me of the limited liability company: INTERNATIO	NAL DEH	YDRA	TED FOOD	S, LLC			
2. (a)	3801 E. SUNSHINE STREET	(b) P.C	D. BOX 103	47			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		-/ <u></u>		_	of limited li BE POST (-	
	SPRINGFIELD, MO 65809		SPRINGFIELD, MO 65808-0347					
	03/15/2019		— М19	000003031				
3.	Date of filing/registration in Florida	4.	-	Docu	ıment nu	mber		
5. (a)								
	Registered Agent and Registered Office shown on the records CT CORPORATION SYSTEM		la Dept.	of State:				
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRES	<u>(S)</u>					
	1200 SOUTH PINE ISLAND ROAD						207	
	PLANTATION	33324				· · · · · · · · · · · · · · · · · · ·	ZUZ3 FEB	-
						٠.	1	• • • •
(b)	Enter name of NEW Registered Agent and/or NEW Register	ed Office a	ddress:	_ 		1	Æ	
							ńο π	ست. في را
	Corporation Service Company					- 12.7 773	<u>-</u>	
	NEW Registered Office Address:						-	
	1201 Hays Street	<u> </u>						
	Tollehannon	22201						
	Tallahassee	FL_32301						
hange igent w vas/we	mited liability company is not organized under the lor changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ne register liability co s of the lir	ed off ompan nited I	ice and the l y, it is here lability com	business by confii ipany or	office of rmed that	the reg	gistered ange(s)
X/2	e & Gome	Jill —	Cilmi,	Vice Presid				
	ure of a member or authorized representative of a member					I name of s		
I hyreb provisio he obli o mere potified	ny accept the appointment as registered agent and agons of all statutes relative to the proper and complet gations of my position as registered agent as provid ly reflect a change in the registered office address. It is writing of this change.	gree to ac le perform led for in l I hereby c	t in thi ance a Chapte onfirn	is capacity. of my duties er 605, F.S. i that the lin	I further, and I as Or, if th nited liab	r agree to m familio nis docun bility con	o compl ir with ient is l ipany h	ly with the and accept being filed as been
$\sum_{\mathbf{n}}$	1 / ha	Grace E.	Kirby.	Asst. Vice	Presiden	ıt		