P19 0000 10579

(Re	questor's Name)		
(Ad	dress)		
	. 	 	
(AO	dress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
	siness Entity Nar	~	
(Bu	isiness Entity Nar	ne)	
(Do	cument Number)		
Certified Copies Certificates of Status			
<u> </u>	<u> </u>		
Special Instructions to	Filing Officer:		
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ Name	ECT: Against The Grain Fitness and Nutrition, Inc. of Corporation	i.
DOC	UMENT NUMBER: P19000010579	
The en	nclosed Statement of Change of Registered Off	fice/Agent and fee are submitted for filing.
Please	e return all correspondence concerning this mat	ter to the following:
Gary F	Rademaker	
Name	of Contact Person	
Again	st The Grain Fitness and Nutrition, Inc.	
Firm/0	Company	
5135 7	Tobermory Way	
Addre	ess	
Brader	nton, FL 34211	
City/S	State and Zip Code	
	rademaker.gary@gmail.com	
E-ma	il address: (to be used for future annual rep	ort notification)
For fu	urther information concerning this matter, pleas	ee call:
Gary I	Rademaker	at (941)238-8832
-	Name of Contact Person	at (941)238-8832 Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the Dep	partment of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section

Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0 nge is submitted for a corpo r to change its registered of	oration organize	ed under the laws of th	e State of Flori	da	<u>. </u>
1. The name of t	the corporation: Against The	e Grain Fitness ar	nd Nutrition, Inc.			
	office address: 5135 Toberm					
_	address (if different):					
4. Date of incor	poration/qualification: 1/29/	2019	Document number	r: <u>—</u> ———————————————————————————————————	9 	
	i street address of the current tment of State: (If resigned,			e on file with th	10	
	Gary Rademaker					
	14009 1st Ave East					
	Bradenton, FL 34212					
6. The name and (if changed):	I street address of the new re	registered agent	(if changed) and /or re	gistered office	2.0	
	Gary Rademaker				120 D	•
	5135 Tobermory Way				EC 1	
		P.O. Box N	IOT acceptable	A.C.	0 P	
	Bradenton, FL 34211				PH I	The state of the s
The street address changed will	ess of its registered office a be identical.	and the street ac	ldress of the business	office of its in	gis ter ec	d agent,
Such change wanthorized by t	as authorized by resolution be board, or the corporation	i duly adopted b n has been notif	y its board of directo ied in writing of the o	rs or by an offi change.	cer so	
(HM)			Gary Rademaker, Presi	dent		
- Constant	of an officer or director			ed name and title		
I further agrée of my duties, ar document is be	the appointment as registe to comply with the provision of am familiar with and a ing filed merely to reflect as speen notified in writing o	ons of all statute accept the obliga a change in the	agree to act in this ca es relative to the prop ation of my positton a registered office addr	ipacity, ier and comple is registered ag ess, I hereby co	te perfo gent. O onfirm	ormance r, if this that the
			12/6/2020			
	nature of Registered Agent		C	Date		
If signing on be	ehalf of an entity:					
Gary Rademake	· · · · · · · · · · · · · · · · · · ·					
7	yped or Printed Name					

* * * FILING FEE: \$35.00 * * *