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(Re	questor's Name)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: FORM (Name of Line	Stoves Doly, LLC nited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Tose Garaa-Pearosa (Name of Person) Farm Stares Larparation (Firm/Company)		
18001 Old Cutler Road Suite 370 Palmetto Bay, Florida 33157 (City/State and Zip Code)		
For further information concerning this matter, ple	ease call:	
(Name of Person) at ((Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amo	ount:	
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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.

Name of the limited liability company:	Harm Stures Dairy, UC
2. (a) Principal office address of limited liability com	18001 Old Cutler Road pany: Suite 370
(<u>Note: MUST BE STREET ADDRESS</u>)	Palmetto Bay, Florida 33157
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	18001 Old Cutler Road
(NOIS: MAT BE POST OFFICE BOA)	Suite 370 Palmetto Bay, Florida 33157 _
12.10.2004	L04000092200
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:
Registered Agent:	UV DOYCHE CVEUTIONS # 221
Registered Office Address:	113 NO PROSPET TRY HIVING RO. THE CO.
•	ruim back to 35410
(b) Enter name of NEW Registered Agent and/or	NEW Registered Office address:
NEW Registered Agent:	Jose Garcia-Pedrosa
NEW Registered Office Address:	18001 Old Cutler Road
(MUST BE FLORIDA STREET ADDRESS)	Suite 370 Palmetto Bay, Florida 33157
If the limited liability company is not organized under that after the change or changes are made, the Florida s office of the registered agent will be identical. Or, in the	treet address of the registered office and the business
hereby confirmed that the charge(s) was/were authorize liability company or as otherwise provided in the articles.	he case of a Florida limited liability company, it is ed by an affirmative vote of the members of the limited es of organization or the operating agreement of the
limited liability compand.	
(Signature of a member or authorized representative of a member)	
Larros Bared	
(Printed or typed name of signee)	ad agree to get in this equality. I further gaves to
comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my posit F.S. Or, if this document is being filed to merely reflect confirm that the limited tability company has been not	nd agree to act in this capacity. I further agree to a proper and complete performance of my duties, and I tion as registered agent as provided for in Chapter 608, t a change in the registered office address, I hereby ified in writing of this change.
(Signatur of Registered Agent)	2000 SEC
Division of Corporations, P.O. I	Box 6327, Tallahassee, FL 32314 ASS
INHS18 (05/08)	