## Po200040701

(Req	uestor's Name)	
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(City	/State/Zip/Phone	e #)
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

POD9 3/20/08

## **COVER LETTER**

Division of Corporations		
SUBJECT: GLRS FARMS, INC. (Name of Corporation)		
DOCUMENT NUMBER: P02000040701	<del></del>	
The enclosed Statement of Change of Registered Office/Agent and	fee are submitted for filing.	
Please return all correspondence concerning this matter to the follo	owing:	
LUNDGREN, ROBERT (Name of Contact Person	)	
(Name of Contact I cison	·)	
GLRS FARMS, INC.		
(Firm/Company)		
14545 SW 79 CT (Address)		
(Address)		
MIAMI, FL 33158 (City/State and Zip Code	· .	
For further information concerning this matter, please call:	,	
Robert Lundgren at ( 305 (Area ( Area	238-7884 a Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Department of Star		
Amendment Section A Division of Corporations D P.O. Box 6327 Tallahassee, FL 32314 2	treet Address: Amendment Section Division of Corporations Clifton Building 661 Executive Center Circle Callahassee, FL 32301	

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tatement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
. The name of the corporation: GLRS FARMS, INC.
. The principal office address: 14545 SW 79 CT , Miami, FI 33158
. The mailing address (if different): Same
. Date of incorporation/qualification: 4/8/2002 Document number: P02000040701
The name and street address of the current registered agent and registered office on file with the Florida Department of State:
LUNDGREN, RICHARD
9875 SW 69 CT
PINECREST, FL 33156
The name and street address of the new registered agent (if changed) and /or registered office (if changed):
LUNDGREN, ROBERT
14545 SW 79 CT , Miami, FI 33158
(P.O. Box NOT acceptable)
The street address of its registered office and the street address of the business office of its registered agent, s changed will be identical.
such change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change.
Kuhara Jundaru Richard N. Lundgren President (Signature of an officer or director) (Printed or typed name and title)
hereby accept the appointment as registered agent and agree to act in this capacity, further agree to comply with the provisions of all statutes relative to the proper and complete performance f my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this ocument is being filed merely to reflect a change in the registered office address, I hereby confirm that the orporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
f signing on behalf of an entity:
GLRS FARMS, INC.
(Typed or Printed Name)

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

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)