752670

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: A CAPANOE Farms, Inc., Name of Corporation
DOCUMENT NUMBER: 152670
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Meredith Spirat Name of Contact Person
Miker & Tighe, P.A.
800 E. Broward Blvd. Stc. 710
Ft. Lauderalale FL 33301 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mere at (954) 467-7744 Name of Contact Person at (954) 467-7744 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, 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 statement of change is submitted for a corporation organized under the laws of the State of
1. The name of the corporation: Arapahoe Farms, Inc.
2. The principal office address: 1133 S. Wivasity M. Ste. 211
Pantation, FL 33324
3. The mailing address (if different): P.O. Box 194.39
Plantation, FL 33318
4. Date of incorporation/qualification: 5-29-1980 Document number: 752670
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Brough, Chadron, LLEVINE, P.A.
Weston Corporate Contre
2700 S. Commerce PKWU CTE 305-0
Weston, FL 33331 PM =
6. The name and street address of the new registered agent (if changed) and /or registered of the (if changed):
TUCKET & Tight, P.A.
P.O. Box NOT acceptable
Fortlanderdole, FL 33301 5 5
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Carolina of the president CAROLLASEK, PRESIDENT Printed or typed name and title, PRESIDENT
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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