P03000141879

(Requestor's Name)
	Address)
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	City/State/Zip/Phone #)
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	(Document Number)
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AUG 1 0 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

Surgect. Farm Stores Land Company

Name of Corporation

DOCUMENT NUMBER. P03000141879

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:

Jose Garcia-Pedrosa

Name of Contact Person

Farm Stores Land Company

Firm/Company

2937 SW 27th Avenue, Suite # 203

Address

Coconut Grove, Florida 33133

City/State and Zip Code

carlos.bared@farmstores.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Gutierrez

₋305 \ \2

264-5205

Name of Contact Person

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

MIENT 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.		
	1. The name of the corporation: Farm Stores Land Company		
	2. The principal office address: 2937 SW 27th Avenue, Suite 203		
	Coconut Grove, Florida 33133		
3. The mailing address (if different):			
	4. Date of incorporation/qualification: 11-21-2003 Document number: P03000141879		
P. The name and street address of the Florida Department of State: (If resigned, enter resigned)			
	Garcia-Pedrosa, Jose		
	2937 SW 27th Avenue, Suite 203		
	Coconut Grove, Florida 33133		
/	O. The name and street address of the registered agent (if changed) and /or registered office (if changed): 1800 Old Celler Ro # 370		
	Pal with Pay 33157		
	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, of the corporation has been notified in writing of the change. Carlos Bared / DS		
	Signature of an officer or director Printed or typed name and title		
	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		

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