

124923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED
14 MAY 12 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 13 2014

J. CARROTHERS



CORPORATION SERVICE COMPANY

CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

ATTENTION: KATHY CARROTHERS

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis Smith , jsmith2@cscinfo.com

Date: May 8, 2014

Order#: 046431/046

Re: LAKELAND ANIMAL NUTRITION, INC.

** CORRECTED FILING (We spoke about by Phone)

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn: Janis Smith
c/o Corporation Service Company
2711 Centerville Road, Suite 400
Wilmington, DE 19808
Ext. 63110

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LAKELAND ANIMAL NUTRITION, INC.
2. The principal office address: 2725 South Combee Road, Lakeland, FL 33803
3. The mailing address (if different): P O Box 24868, Lakeland, FL 33802
4. Date of incorporation/qualification: 7/18/1931 Document number: 124923

- 6 ☒ The name and street address of the ^{new} ~~current~~ registered agent and registered office on file with the Florida Department of State: ~~(If resigned, enter resigned)~~

Corporation Service Company

1201 Hays Street

Tallahassee

FL 32301

- 5 ☒ The name and street address of the ^{current} ~~new~~ registered agent (if changed) and /or registered office (if changed):

URA Services

P.O. Box NOT acceptable

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.

[Signature]
Signature of the officer or director

Dona Priebe, Vice President

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.

Corporation Service Company

By: [Signature]
Signature of Registered Agent

May 6, 2014

Date

If signing on behalf of an entity:

Grace E. Kirby Asst Vice President

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 (03/12)