361880

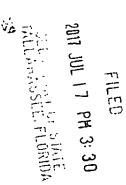
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COVER LETTER

	nendment Section vision of Corporations	
SUBJECT	r: EDGE WOOD FARMS, IA	JC.
DOCUMI	ENT NUMBER: 341880	
	sed Statement of Change of Registered Office/a	Agent and fee are submitted for filing.
Please retu	irn all correspondence concerning this matter to	o the following:
	Laura Gallague Name of Conta	act Person
	Firm/Com	pany
	2801 Chancellarsvill Addres	e Dn Apt 235
	Tallahassee City/State and	7, FL 3231Z Zip Code
	E-mail address: (to be used for fut	et ure annual report notification)
For furthe	r information concerning this matter. please ca	n:
<u>La</u>	Ura Gallagher Name of Contact Person	at (<u>850</u>) <u>321-0852</u> Area Code & Daytime Telephone Number
Enclosed i	s a \$35.00 check made payable to the Departm	ent 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

TO:

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: EDGEWOOD FARMS, INC.
2. The principal office address: 2736 NW 77th BLVD, MSG 257
GAINESVILLE, FL 32606
3. The mailing address (if different): <u>h/a</u>
4. Date of incorporation/qualification: 3/30/1970 Document number: 301880
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)
MICHAELENH WILSON
8011 NW 25th LANE
GHINESVILLE, FL 32606
6. The name and street address of the new registered agent (if changed) and /or registered office.
LAURA GALLACHER
2801 CHANCELLOKSVILLE NK, APT 235
TALLAHASSEE, FL MANON 323/2
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.
E.B. WILSON, JK. 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.
MUMA AMANUS JULY 14, 2017 Signature of Registered/Rigent July 19, 2017
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

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