790978

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscqlobal.com

Date: November 13, 2020

Order#: 503761-011

Re: ALABAMA FARMERS COOPERATIVE, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Erika Zavala Daza

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

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

OUCA.XCOA

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

		02, 617.0502, 607.1508, or 617.1508, Florida Statute ation organized under the laws of the State of <u></u> AL	s, this	
in orde	er to change its registered offic	ce or registered agent, or both, in the State of Florida	! .	
1. The name of	the corporation: ALABAMA FA	ARMERS COOPERATIVE, INC.		
		RVILLE RD. , N.E., DECATUR, AL 35601		
7. The mailing	address (if different) P.O.BO)	(2227, DECATUR, AL 35609-2227		
	poration/qualification: 01/14/			
	d street address of the current artment of State: (If resigned, e	registered agent and registered office on file with the nter resigned)		
	CT CORPORATION SYST	EM	~	
	1200 S. PINE ISLAND ROAD			
	PLANTATION, FL 33324		2029 1:07 1 7	•
				•
6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed):			Pii 12:	, 4 , ,
	Corporation Service Compa	any	ιπ œ	
	1201 Hays Street		Ç	
		P.O. Box NOT acceptable		
	Tallahassee	FL 32301		
The street addr as changed wil	ess of its registered office and le identical.	d the street address of the business office of its regis	stered a	gent,
Such change wanthorized by t	as authorized by resolution d he board, or the corporation h	uly adopted by its board of directors or by an office has been notified in writing of the change.	r so	
Que 8 000		Jill Cilmi, Vice President		
Signad	ute of an officer or director	Printed or typed name and title		
l further agree of my duties, ai document is be corporation ha	to comply with the provision:	ed agent and agree to act in this capacity. s of all statutes relative to the proper and complete ept the obligation of my position as registered agen hange in the registered office address. I hereby con his change.	perforn u. Or firm the	nance if this at the
By:	Share C-Knby gnature of Registered Agent	11/13/2020		
		Date		
It signing on be	ehalf of an entity:			
	Asst. Vice President			
٦	Typed or Printed Name			
	* * * 1	H INC FFF: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)