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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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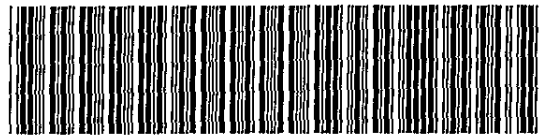
(Business Entity Name)

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FILED
TALLAHASSEE, FLORIDA

03 APR 25 AM 11:00



Phone:
239-369-1900

Flint Brothers Cattle Co., LLP
245 Homestead Rd.
Lehigh Acres, FL 33936

Fax:
239-369-1947

4/17/03

To: FL Dept of State

Division of Corporations

PO Box 6327

Tallahassee, FL 32314

Ref: Doc. A01000001713

TALLAHASSEE, FLORIDA

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Please find enclosed 2003 UBR Report
and check #1091 for \$141.25.

also enclosed is the change of
Registered agent form a certificate of
amendment form along with check
number #1100.

If there are any questions please
contact Sandra Walworth, Bookkeeper at
239-369-1900 or Fax call 239-565-3082.

Please send all correspondence to:

Flint Bros. Cattle Co. LLP
245 Homestead Rd
Lehigh Acres, FL 33936

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Flint Brothers Cattle Partnership, LLP
Name of the limited partnership

2. 2/22/02
Date of filing/registration in Florida

3. A01000001713
Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

HARRY L. FLINT
Name

245 Homestead Rd
Address

Lehigh Acres, FL 33931
City, State and Zip

5. The name and address of the new registered agent and/or office:

Ronald C. Flint
Name

200 Homestead Rd
Florida street address (P.O. Box **not** acceptable)

Lehigh Acres FL 33931
City, State and Zip

6. Such change(s) was/were authorized by the general partner(s):

(old) Ronald C. Flint

Harry L. Flint

Signature of General Partner

(new)

Ronald C. Flint

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 obligations 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 limited partnership has been notified in writing of this change.

Ronald C. Flint
Signature of Registered Agent

Make checks payable to Florida Department of State and mail to:
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00

FILED
03 APR 25 AM 11:00
TALLAHASSEE, FLORIDA