

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850) 617-6380

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone : (850)878-5368 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## REGISTERED AGENT CHANGE SHENANDOAH GROWERS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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Corporate Filing Menu

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JUN = 9 2014

T. CARTER

6/6/2014

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT:				
Name of Co	orporation			
DOCUMENT NUMBER:				
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter	to the following:			
the state of the s	to the terror ing.			
Name of Cor	stact Person			
CT Corporation System				
Firm/Company				
1200 South Pine Island Road				
Add	108/			
Plantation, Florida 33324				
City/State an	d Zip Code			
CT-Statecommunications@wolterskluwe	x.com			
E-mail address: (to be used for future annual report notification)				
13-titati bulliess. (to de used for 1	mine attinual televit normostrony			
For further information concerning this matter, please (	call:			
Angela Lamaruggine	855 316-8944			
Name of Contact Person	at ( ) Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
·	Tallahassee, FL 32301			

CR2E045 (03/12)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute inge is submitted for a corporation organized under the laws of the State of r to change its registered office or registered agent, or both, in the State of Florida	
I. The name of	the corporation: SHENANDOAH GROWERS, INC.	
2. The principal	office address: 3453 KOEHN DRIVE HARRISONBURG, VA 22802	
3. The mailing s	ddress (if different):	
4. Date of incor	poration/qualification: 03/03/2003 Document number: F03000001023	
	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	
	IOHN MICHAEL LYNN	
	7 Barracuda Lane	<u> →</u> ₹0
	Key Largo, FL 33037	
6. The name and (if changed):	street address of the new registered agent (if changed) and for registered office	do già
	C T Corporation System	
	to C T Corporation System, 1200 South Pine Island Road	ф. 5
	P.O. Box. NOT acceptable Plantation, Florida 33324	10 <del>-</del>
The street added	ess of its registered office and the street address of the business office of its regis be identical.	tered agent,
	s authorized by resolution duly adopted by its board of directors or by an officence board, or the corporation has been notified in writing of the change.	
Down	Barbara Kite, Secretary	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my dulies, and I am familiar with and accept the obligation of my position as reist document is being filed merely to reflect a change in the registered office addition the corporation has been notified in writing of this change.  **position 8ystem**	gistered ess, I
₽À: (P)	passive of Registered Agent Date	<del>and the state of </del>
Sierra B Vice Pre	thalf of an entity: Uffis aldant & Assistant Secretary you 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
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