

Division of Corporations

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## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H13000203962 3)))



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Division of Corporations

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Account Name : HENDERSON, FRANKLIN, STARNES & HO

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hfra@henlaw.com

## REGISTERED AGENT CHANGE DISSTON ISLAND HAVESTING CO., INC.

Certificate of Status	0
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

$\cdot$
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: DISSTON ISLAND HAVESTING CO., INC.
2. The principal office address: 5500 FLAGHOLE ROAD
CLEWISTON, FL 33440
3. The mailing address (if different):
4. Date of incorporation/qualification: 11/13/1981 Document number: F53596
<ol> <li>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)</li> </ol>
JOE M. HILLIARD
FLAGHOLE RD
CLEWISTON, FL 33440
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
HF REGISTERED AGENTS, LLC
1715 MONROE STREET
P.O. Box NOT acceptable
FORT MYERS, FL 33901
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.
JOE MARLIN HILLIARD, PRESIDENT
Supplies of an officer of difficient Printed or typed name and little
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 dulies, and i am fomiliar 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.
9-12-2013
Signallyte of Stogistered Agent Date
If signing on behalf of an entity:
GUY E. WHITESMAN
Typed or Prisect Name
" " " P. I. L. I'V P. P. J " " " " " " " " " " " " " " " " "

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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