

Florida Department of State

Division of Corporations Public Access System

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REGISTERED AGENT CHANGE

ASSOCIATION OF STATE DEPARTMENTS OF AGR

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3/24/2008

T'Roberts: MAR 2-5 2008

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

ınıs statement C	of change is submitted for a co	rporation organized under the laws	1308, Floriaa Stanties, s of the State of
DC		registered office or registered age	
of Florida.	THE NATIO	NAL ASSOCIATION OF STATE DEP	ARTMENTS OF EX
1. The name of	the corporation: AGRICULTU		, marine
2. The principa	office address: 1156 15th Str	reet NW, Ste. 1020, Washington, DC	20005
3. The mailing	address (if different):		
_			Û _N
4. Date of incor	poration/qualification: 3/10	/2005 Document numb	er: F96000003430
5. The name an		registered agent and registered offic	ce on file with the
	2731 EXECUTIVE PARK DR	IVE, SUITE 4	
	WESTON FL 33331		
	nd street address of the new	registered agent (if changed) and	/or registered office (if
changed):	Business Filings Incorporated		
	1203 Governors Square Blvd.		•
	(P.O. Box or po Tallahassee, FL 32301-2960	rsonal mailbox NOT acceptable)	
The street addragent, as chang	ess of its registered office and ged will be identical.	d the street address of the business	office of its registered
Such change wanthorized by t	as authorized by resolution d he board, or the corporation h	uly adopted by its board of director has been notified in writing of the c	rs or by an officer so change.
(Signature of an office	W. Kichell r, chairman or vice chaoman of the board)	Richard W. Kirchhoff, Vice-F (Printed or typed name at	
I hereby accept I further agree performance o registered aget office address,	t the appointment as registere to comply with the provisions f my duties, and I am familiar nt. Or, if this document is bei I hereby confirm that the cor	ed agent and agree to act in this ca s of all statutes relative to the prop with and accept the obligation of ng filed merely to reflect a change poration has been notified in writi	pacity. ver and complete my position as in the registered ng of this change.
M	win	3/21/08 (Date)	
(5	Signature of Registered Agent)	(Date)	
	^ .		
If signing on beha	lf of an entity:	AVP	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314