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> ZOIZ MAY 15 P 1: 00 SECRETARY OF STATE

T. LEMIEUX

COVER LETTER

TO: Amendment Section Division of Corporations

Surrect. Selway Farms, Inc.

Name of Corporation

DOCUMENT NUMBER: G36230

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shelley B. Maurice, Esq.

Name of Contact Person

Shelley B. Maurice, P.A.

Firm/Company

125 North Swinton Avenue

Address

Delray Beach, Florida 33444

City/State and Zip Code

jolyn1200@ATT.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jolyn Sellers

,561

451-6354

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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, Floria ange is submitted for a corporation organized under the laws of the State o er to change its registered office or registered agent, or both, in the State of	of Florida	
1. The name of	the corporation: Selway Farms, Inc.		
2. The principal	office address: 5150 Hutchinson Way,Lake Lady Florida 3	32159	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: April 28, 1983 Document number: G36	230	
	d street address of the current registered agent and registered office on file rtment of State: (If resigned, enter resigned)	with the	
	Robert R. Cyrus , Esq.		
	214A North Third Street		
	Leesburg, Florida 34748	 ,	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered	OIIZ SHAY 15 F	
	Shelley B. Maurice, Esq.	25	1
	125 North Swinton Avenue		;
	P.O. Box NOT acceptable Delray Beach, Florida 33444	1: 00	
The street addre	ess of its registered office and the street address of the business office of be identical.	f its registered a	agent,
	as authorized by resolution duly adopted by its board of directors or by a ne board, or the corporation has been notified in writing of the change.		
Sphatu	To lun H. Sellers To lun H. Sellers To lun H. Sellers Thinted or typed name and	ers Secr	change
I hereby accept I further agree	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 co my duties, and I am familiar with and accept the obligation of my positi is document is being filed merely to reflect a change in the registered of that the corporation has been notified in writing of this change.	omplete ion as registere fice address, I	ed .
Sle	nature of Registered Agent 5/7/1 Date		
U	half of an entity:		
Shelle	ey B. Manrice		

* * * FILING FEE: \$35.00 * * *