## H20589

" (Re	questor's Name)	1
(Ad	dress)	
(Ad	dress)	
•	·	
(C)	JOhnto IZin IDhan	- 40
(Cir	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
•	•	•
<b>Ф</b> о	cument Number)	
(100)	cament Namber)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
	g	
•		

Office Use Only



900023229409

09/29/03-01031-005 \*\*35.00

O3 SEP 29 AM II: 39

Homano Andraio

## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Foster Farms, Inc. (Name of corporation)
DOCUMENT NUMBER: H20589
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:
Willard D. Dover, Esq.
(Name of person)
Niles, Dobbins, Meeks, Raleigh & Dover, LLP
(Name of firm/company)
2601 E. Oakland Park Blvd., #400
(Address)
Fort Lauderdale, Florida 33306
(City/state and zip code)
For further information concerning this matter, please call:
Willard D. Dover, Esq. at ( 954 ) 565-2200
Willard D. Dover, Esq. at (954) 565-2200  (Name of 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 409 E. Gaines Street Tallahassee, FL 32399

TO: Amendment Section

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

	•	02, 617.0502, 607.1508, or 617.1508, Florida Storation organized under the laws of the State of	tatutes,
Florida		egistered office or registered agent, or both, in th	ie State
of Florida.			
1. The name of	the corporation: Foster Farms, I	Inc.	
2. The principal	l office address: 2318 S.W. 21st	Street	
	e, Florida 34972		
3. The mailing	address (if different):		
		٠ <u>٠</u> ١- ١-	03 s
4. Date of incor	rporation/qualification: 9/12/8	Document number: H20589	EP 29
	nd street address of the current repartment of State:	egistered agent and registered office on file with the	
r tortaa Depa	Willard D. Dover		= C
	Broward Financial Centre	THE STATE OF THE S	မ္
	500 E. Broward Blvd., 7th Floor,	, Ft. Lauderdale, Florida 33394	
6 The name a	nd street address of the new re	egistered agent (if changed) and /or registered of	ffice (if
changed):	Willard D. Dover	substitut agent (ii changou) and for registered or	inco (ii
	2601 E. Oakland Park Blvd., #40	00 onal mailbox NOT acceptable)	
	Fort Lauderdale, Florida 33306	·	
The street addragent, as change	ress of its registered office and t ged will be identical.	the street address of the business office of its regi	istered
Such change wauthorized by	as authorized by resolution duly the board, or the corporation has	y adopted by its board of directors or by an office seen notified in writing of the change.	er so
(Signature of an Affice	er, chairman or vice chairman of the board)	(Printed or typed name and title)	_
I hereby accep I further agree performance o registered age	t the appointment as registered to comply with the provisions of f my duties, and I am familiar w nt. Or. if this document is being	agent and agree to act in this capacity.  of all statutes relative to the proper and complete  with and accept the obligation of my position as  g filed merely to reflect a change in the registere  oration has been notified in writing of this chang  9/15/03	e d e.
	Signature of Registered Agent)	(Date)	<del></del>
If signing on beha			
Willa	(Typed or Printed Name)	(Capacity)	
		(Capacity)	

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