H87035

(Requestor's Name) 400008779244 837268414660 CYNTHIA SUTHERLAND 561 832-3300 Company BROAD & CASSEL Address ONE CLEMATIS STREET STE 500 Dept Floor/Suits/Floors CON WEST PALM BEACH FL ZP 33401 (Business Entity Name) (Document Number) 11/08/02--01060--004 **35.00 Certificates of Status Certified Copies _____ Special Instructions to Filing Officer: 14 Chanse 11/14/02 T. Lewis 11/14/02 Office Use Only

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

	•	502, 617.0502, 607.1508, or 617.1508, Florida Statu poration organized under the laws of the State of	tes,
•	_	egistered office or registered agent, or both, in the Si	tate
of Florida.			
1. The name of t	he corporation: Sunligh	nt Citrus Packing, Inc.	
2. The principal	office address: 1008 Bell	Avenue, Fort Pierce, FL 34982	 -
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 11/2	Document number: H87035	<u> </u>
	I street address of the current retment of State:	egistered agent and registered office on file with the	
	Stephen Boyo	TALL VALUE SEC	
	1008 Bell Av	ve.	TI
	Ft. Pierce,	2016	İ
6. The name an changed):	d street address of the new re	egistered agent (if changed) and /or registered office	if
_	"	the P.A.	_1
_	Broad and Cas One North Cle (P.O. Box or perso	ematis St., #500 onal mailbox NOT acceptable)	
	West Palm Bea	ach, FL 33401	
The street addre	as of its registered office and to will be identical.	the street address of the business office of its register	ed
Such change wa authorized by h	s authorized by resolution dul- be board, or the corporation has	y adopted by its board of directors or by an officer so s been notified in writing of the change.)
(Signature of an officer.	chairman of the board)	Stephen Boyd, President (Printed or typed name and title)	
I hereby accept I further agree to performance of registered agent	the appointment as registered of comply with the provisions of my duties, and I am familiar with the provisions of 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 registered pration has been notified in writing of this change.	
(Si	gnature of Registered Agent)	9/1/02 (Date)	
If signing on behalf	of an entity:		
Ronald M.	Gache, P.A.	President	
T)	yped or Printed Name)	(Capacity)	

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