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H18000274045

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida

1. 1	lame of the limited liability company: Alico Plant W	
2. (a)	10070 Daniels Interstate Court	(b) 10070 Daniels Interstate Court
z. (a,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE ROX)
	Suite 100	Suite 100
	Ft. Myers, FL 33913	Ft. Myers, FL 33913
	09/02/2004	L04000065529
3.	Date of filing/registration in Florida	4, Document number
s 1.	Timothy M. Hughes, Esq.	
5. (a)	Registered Agent and Registered Office shown on the records of	of the Florida Dept. of State:
	101 E. Kennedy Boulevard	
	Registered Office Address (MUST BE FLORIDA STREET	[ADDRESS]
	Suite 2800	
	Tampa , F	L 33602 R S S S T
(b)	Timothy M. Hughes, Esq.	
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office address:
	101 E. Kennedy Boulevard	TALLANISCE Address:
	NEW Registered Office Address:	De la companya de la
	Suite 2700	<u> </u>
	Tampa F	FL_33602
the o	change or changes are made, the Florida street address of a Florida limited	laws of the State of Florida, it is hereby confirmed that after of the registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) s of the limited liability company or as otherwise provided in the limited liability company.
	Loh Kun	John Kiernan, CFO
Si	malure of a member or authorized representative of a member	Printed or typed name of signee
I he prov the c to m noti	reby accept the appointment as registered agent and a visions of all statules relative to the proper and complebilizations of my position as registered agent as provide erely reflect a change in the registered office address, fied in writing of this change.	agree to act in this capacity. I further agree to comply with the tie performance of my duties, and I am familiar with and accept ded for in Chapter 605, F.S. Or, if this document is being filed I hereby confirm that the limited Hability company has been
Sign	nature of Registered Agent	

Division of Corporations * P.O. Box 6327 * Tallahassee, FL 32314 FILING FEE: \$25.00