
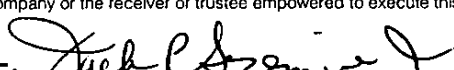


**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

\_\_\_\_\_

<b>DOCUMENT # L05000002451</b>						<b>Secretary of State</b> 03-06-2006 90204 043 ****50.00																									
<b>1. Entity Name</b> LOOP FARMS, LLC																															
<b>Principal Place of Business</b> 8423 STATE ROAD 674 WIMAUMA, FL 33598				<b>Mailing Address</b> 8423 STATE ROAD 674 WIMAUMA, FL 33598																											
<b>2. Principal Place of Business</b>				<b>3. Mailing Address</b>																											
Suite, Apt. #, etc.				Suite, Apt. #, etc.																											
City & State				City & State																											
Zip		Country		Zip		Country																									
<b>6. Name and Address of Current Registered Agent</b>  SIZEMORE, JACK P JR 8423 STATE ROAD 674 WIMAUMA, FL 33598				<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code																											
<b>4. FEI Number</b> 20-2144246				<b>Applied For</b> Not Applicable																											
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$5.00 Additional Fee Required</b>																											
<b>8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.</b>																															
<b>SIGNATURE</b> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)				<b>DATE</b>																											
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>				<b>Make check payable to Florida Department of State</b>																											
<b>9. MANAGING MEMBERS/MANAGERS</b>				<b>10. ADDITIONS/CHANGES</b>																											
<table border="1"><tr><td>TITLE</td><td>MGRM</td><td><input type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td>BROUGHTON, OLIVER DEAN</td><td></td></tr><tr><td>STREET ADDRESS</td><td>8423 STATE ROAD 674</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>WIMAUMA, FL 33598</td><td></td></tr></table>				TITLE	MGRM	<input type="checkbox"/> Delete	NAME	BROUGHTON, OLIVER DEAN		STREET ADDRESS	8423 STATE ROAD 674		CITY-ST-ZIP	WIMAUMA, FL 33598		<table border="1"><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE	MGRM	<input type="checkbox"/> Delete																													
NAME	BROUGHTON, OLIVER DEAN																														
STREET ADDRESS	8423 STATE ROAD 674																														
CITY-ST-ZIP	WIMAUMA, FL 33598																														
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																													
NAME																															
STREET ADDRESS																															
CITY-ST-ZIP																															
<table border="1"><tr><td>TITLE</td><td>MGRM</td><td><input type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td>SIZEMORE, JACK P JR</td><td></td></tr><tr><td>STREET ADDRESS</td><td>8423 STATE ROAD 674</td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>WIMAUMA, FL 33598</td><td></td></tr></table>				TITLE	MGRM	<input type="checkbox"/> Delete	NAME	SIZEMORE, JACK P JR		STREET ADDRESS	8423 STATE ROAD 674		CITY-ST-ZIP	WIMAUMA, FL 33598		<table border="1"><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE	MGRM	<input type="checkbox"/> Delete																													
NAME	SIZEMORE, JACK P JR																														
STREET ADDRESS	8423 STATE ROAD 674																														
CITY-ST-ZIP	WIMAUMA, FL 33598																														
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																													
NAME																															
STREET ADDRESS																															
CITY-ST-ZIP																															
<table border="1"><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>				TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table border="1"><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete																													
NAME																															
STREET ADDRESS																															
CITY-ST-ZIP																															
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																													
NAME																															
STREET ADDRESS																															
CITY-ST-ZIP																															
<table border="1"><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>				TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table border="1"><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete																													
NAME																															
STREET ADDRESS																															
CITY-ST-ZIP																															
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																													
NAME																															
STREET ADDRESS																															
CITY-ST-ZIP																															
<table border="1"><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>				TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table border="1"><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete																													
NAME																															
STREET ADDRESS																															
CITY-ST-ZIP																															
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																													
NAME																															
STREET ADDRESS																															
CITY-ST-ZIP																															
<table border="1"><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Delete</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>				TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			<table border="1"><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>				TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete																													
NAME																															
STREET ADDRESS																															
CITY-ST-ZIP																															
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																													
NAME																															
STREET ADDRESS																															
CITY-ST-ZIP																															
<b>11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.</b>																															
<b>SIGNATURE:</b>  Jack P Sizemore Jr. 3-1-06 813-716-2914																															
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #																															