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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Ernst Southern Native Sec (Name of Lin		ility Company)	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Off	fice Chang	e and fee(s) are submitted for filing.	
	_	•	
Please return all correspondence concerning the	iis matter t	o the following:	
Joe S Reams III			
(Name of Person)			
Final Couthour Native Coade II C			
Ernst Southern Native Seeds LLC (Firm/Company)			
418 Şand Dollar Way			
(Address)	•		
Greenville, FL 32331			
(City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	_	
For further information concerning this matter	, please cal	I:	
Paula Dithrich	at (814	336-2404	
(Name of Person)		(Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS:		
Division of Corporations	Registration Section Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301			
Enclosed is a check for the following	amount:		
\$25 Filing Fee	! \$	55 Filing Fee & Certified Copy	
INHS18 (8/05)			

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: Ernst Southern Native Seeds LLC 2. The mailing address of the limited liability company is: ____ 9006 Mercer Pike, Meadville, PA 16335-9299 02/09/05 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: CT Corporation System 1200 South Pine Island Road Address Plantation, FL 33324 City, State and Zip 6. The name and address of the new registered agent and/or office: Joe S Reams III Name 418 Sand Dollar Way Florida street address (P.O. Box NOT acceptable) FL 32331 City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

Andy L Ernst

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, Phereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

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