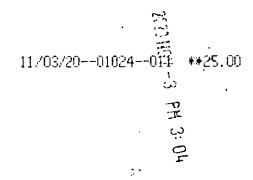
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(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								





700354041057



12/13/20



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: October 30, 2020

Order#: 462358/036

Re: HICKORY BRANCH CITRUS, LLC

Enclosed please find:

XX___ Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX __ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.

2. (a)	3602 COLONIAL COURT		b) 3602 COLONIAL COURT				
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	FORT MYERS, FL 33913-6636	<u> </u>	FORT MYERS, FL 33913-6636				
	11/18/2005		L05000111738				
3.	Date of filing/registration in Florida	4.	Document number				
5. (a)	C T CORPORATION SYSTEM						
5. (a)	C T CORPORATION SYSTEM Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1200 SOUTH PINE ISLAND ROAD Registered Office Address. (MUST BE FLORIDA STREET ADDRESS)						
	1200 SOUTH PINE ISLAND ROAD						
	Registered Office Address (MUST BE FLORIDA STREET	<u>sy</u> ့်					
			P				
	PLANTATION	33324	3: Oth				
	, FL	~ 					
	Corporation Service Company NEW Registered Office Address:		 				
	1201 Hays Street						
	1201 Hays Street						
	Tallahassee, FI	32301					
change agent w was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lister authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	register ability co of the lin	ed office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in				
	ure of a member or authorized representative of a member	Jill	Cilmi, Authorized Person				
Signat	ure of a member or authorized representative of a member		Printed or typed name of signee				
provisi the obli to mere notified	by accept the appointment as registered agent and agrows of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I it in writing of this change.	ree to ac perform d for in t hereby c	t in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been				
7	Draw C-Kuby						

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

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.

I. Na	ame of the limited liability company: HICKORY BRAN	NCH C	ITR	US, LLC	- <u>-</u>	
2. (a)	3602 COLONIAL COURT		(b)	3602 CC	LONIAL COURT	
, (,	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)	_	. .,	_	-	nited liability company: POST OFFICE BOX)
	FORT MYERS, FL 33913-6636	_		FORT M	YERS, FL 33913-6	6636
	11/18/2005		L	0500011	1738	
3.	Date of filing/registration in Florida	4.	_		Document numb	er
5. (a)	C T CORPORATION SYSTEM					
J. (u)	Registered Agent and Registered Office shown on the records of t	the Flori	ida I	Dept. of Sta	nte:	. ,
	1200 SOUTH PINE ISLAND ROAD					5
	Registered Office Address (MUST BE FLORIDA STREET A	_				
						1 50
	PLANTATION	33324			_	P
(L)	, FL				_	ري
						40
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office	addı	ress:	_	•
	Corporation Service Company					
	NEW Registered Office Address:					
	1201 Hays Street					
					_	
	Tallahassee . FL	32301				
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the current of a member of a member of a member.	registe bility of the li limited	ered com imit i lia	office and pany, it lead to be a lead of the lead of t	nd the business off is hereby confirme ty company or as o	ice of the registered ed that the change(s)
Signa	ture of a member br authorized representative of a member				Printed or typed nar	me of signee
provisi the obl to mer notified	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. I h d'in writing of this change.	ee to a perfori I for in iereby	ct ii mar Ch con	n this cap ace of my apter 60. firm that	pacity. I further as duties, and I am fi 5, F.S. Or, if this o the limited liabili	gree to comply with the amiliar with and accept document is being filed ty company has been

Signature of Registered Agent
Grace E. Kirby, Asst. Vice President of Corporation Service Company

Division of Corporations P.O. Box 6327 Ta