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11/02/06

Fax Audit Number: H06-000266002 has a current status of REQUESTED

From: THE FLORIDA COMPANY

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Contact Name: SHARPE L MARY

Ph: (608)827-5300

Userid: I20060000001 Account: I20060000001 Sub-Account:

Document Type: EFIL15

Total Pages: 1

Corporate Name: MOCKINGBIRD APIARY LLC

Certified Copy:

Certificate of Status:

Fax Phone Number: (608)824-0405

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\$0.00

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User Year:

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Corp Status: A

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TO FLORIDA:

RE: Change of Agent form

To Whom It May Concern:

I forgot to print the coversheet for this filing - I do have the number that the coversheet produced on the top and bottom of the document. If you are able to file with this information please do so.

If you are not able to file with the number only, please abandon the filing and I will recreate the coversheet.

Please let me know.

Best Regards,
Mary Lou Sharpe
Business Filings Incorporated
800-981-7183 ext. 226
608-827-5501 - fax

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06 NOV - 1 PM 3:03
DIVISION OF CORPORATION

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: MOCKINGBIRD APIARY LLC

2. The mailing address of the limited liability company is : _____

9362 MOCKINGBIRD TRAIL JUPITER FL 33478

2/13/2006

L06000016551

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

THE FLORIDA INCORPORATING COMPANY

Name

1203 GOVERNORS SQUARE, STE. 101

Address

TALLAHASSEE, FL 32301

City, State and Zip

6. The name and address of the new registered agent and/or office:

Business Filings Incorporated

Name

1203 Governors Square, Ste. 101

Florida street address (P.O. Box NOT acceptable)

Tallahassee

FL 32301

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.

Richard J. Sands

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

RICHARD J. SANDS

(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, I hereby confirm that the limited liability company has been notified in writing of this change.

Mark Schaff
(Signature of Registered Agent)

Business Filings Incorporated Mark Schaff, MVP
Division of Corporations, P.O. Box 627, Tallahassee, FL 32314

INHS18(10/99)

FILING FEE: \$25.00

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