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J. BRYAN

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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT:	B & F Central Florida Citrus, LLC Name of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/F	Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence	concerning this matter to the following:		
William Co			
. valle of refa	~**4		
Firm/Compan	ASSOCIATION TO THE PARTY OF THE		
178 S.E. Ethar	n Terrace SEEF FILE		
Stuart, FL 3			
City/State and Zip			
bcairns39@ya E-mail address: (to be used for future			
For further information concerning	ng this matter, please can:		
William Cairns Name of Person	at (561) 352-5765		
	Area Code & Daytime Telephone Number		
STREET/COURIER ADD Registration Section	DRESS: MAILING ADDRESS: Registration Section		
Division of Corporations			
Clifton Building	P.O. Box 6327		
2661 Executive Center Circi Tallahassee, Florida 32301			
Enclosed is a check for t	the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		
INHS18 (5/08)			

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.

Name of the limited liability company:B 8	& F Central Florida Citrus, LLC	
2. (a) Principal office address of limited liability compar	ny: 11380 Prosperity Farms Road	
(Note: MUST BE STREET ADDRESS)	Suite 201 Palm Beach Gardens, FL 33410	
(b) Mailing address of limited liability company:	11380 Prosperity Farms Road	
(Note: MAY BE POST OFFICE BOX)	Suite 201 Palm Beach Gardens, FL 33410	
09/01/2011	L11000103084	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of Sine:	
Registered Agent:	Andrew Helgesen, P.A.	
Registered Office Address:	11380 Prosperity Farms Road Suite 201 Palm Beach Gardens, FL 33410	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	EW Registered Office address: William Cairns	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	178 S.E. Ethan Terrace Stuart ,FL34997	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization	
William Cairns Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S./Or, if this document is being filed to address. I hereby confirm that the limited liability compa	agree to act in this capacity. I further agree to proper and complete performance of my duties, so it is registered agent as provided for in herely reflect a change in the registered office my has been notified in writing of this change.	

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

Signature of Registered Agent