

L12000161558

Sydney Grice

(Requestor's Name)

Anderson Business Advisors

(Address)

3225 McLeod Dr #100

(Address)

Las Vegas, NV 89121

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

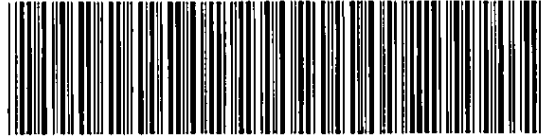
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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

*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.*

1. Name of the limited liability company: Lone Magnolia Farms, LLC
2. (a) 625 E. Twiggs Street, Suite 110  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
Tampa, FL 33602
- (b) 3225 McLeod Dr, Suite 100  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
Las Vegas, NV 89121
3. 12/20/2012  
Date of filing/registration in Florida
4. L12000161558  
Document number

5. (a) Roderick, Stacy  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

150 SE 116TH TERRACE

Williston, FL 32696

- (b) Anderson Registered Agents, Inc.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

625 E. Twiggs Street, Suite 110

NEW Registered Office Address:

Tampa, FL 33602

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.

Sydney Grice

Signature of a member or authorized representative of a member

Sydney Grice

Printed or typed name of signer

*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 605, 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.*

A. T. Mathis,

President

Signature of Registered Agent

By: A. T. Mathis, President of Lone Magnolia Farms, LLC  
Date: 2/22/2013 10:57:18 AM

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2013 FEB -7 PM 4:15  
TREASURY OF STATE  
TALLAHASSEE, FL