Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations Fax Number : (850)617-6383

From:

Account Name : TRENAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL & MULLIS,

Account Number : 076424003301 Phone : (813)223-7474
Fax Number : (813)227-0435

Enter the email address for this business entity to be used for futilize annual report mailings. Enter only one email address please.

Email Address: tgood@trenam.com

LLC REGISTERED AGENT CHANGE ALICO CITRUS NURSERY, LLC

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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.

Alico Citrus Nursery, LLC
(b) 10070 Daniels Interstate Court
Hity company: Mailing address of limited liability company: ORESS (Nate: MAY BE FOST OFFICE BOX)
Suite 100
Ft. Myers, FL 33913
L13000134245
Florida 4. Document number
on the records of the Florida Dept. of State:
ORIDA STREET ADDRESS)
FI. 33602
r NEW Registered Office address:
FL 33602
ged under the laws of the State of Florida, it is hereby confirmed that after street address of the registered office and the business office of the registered florida limited liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwise provided in agreement of the limited liability company. John Klernan, CFO Printed or typed name of signee and agent and agree to act in this capacity. I further agree to comply with the er and complete performance of my duties, and I am familiar with and accept agent as provided for in Chapter 605, F.S. Or, If this document is being filed office address. I hereby confirm that the limited liability company has been
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Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00