

L130001166466

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

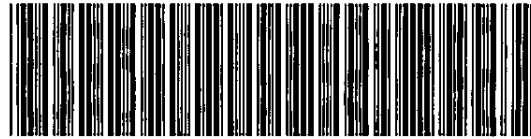
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2013 DEC 26 PM 3:50

SECRETARY OF STATE
TALLAHASSEE FLORIDA

JAN 02 2014
3:00 PM



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 17, 2013

MIGUEL RODRIGUEZ
5062 NE 122ND DRIVE
OKEECHOBEE, FL 34972

SUBJECT: OKEECHOBEE FARRIER SUPPLIES, LLC
Ref. Number: L13000166466

We have received your document for OKEECHOBEE FARRIER SUPPLIES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 113A00028623

RECEIVED
TALLAHASSEE, FLORIDA
DECEMBER 26, 2013

2013 DEC 26 PM 3:50

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 17, 2013

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OKEECHOBEE, FL 34972

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Deborah Bruce
Regulatory Specialist II

Letter Number: 113A0002862

SECRETARY OF STATE
TAMARA HASSLER-FLORIDA

2013 DEC 26 PM 3:50

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12/27/13

I have completed another form with the correct Name and address of the current registered agent that we need changed to Miguel Rodriguez. You should still have the check that I originally sent.
Thank you, Miguel Rodriguez

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Okeechobee Farmer Supplies
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Miguel Rodriguez
Name of Person

Okeechobee Farmer Supplies
Firm/Company

5062 NE 122nd Drive
Address

Okeechobee, FL 34972
City/State and Zip Code

barnowl711@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kasey Rodriguez at (863) 610-3411
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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2018 DEC 26 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 605.0114, 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: Okeechobee Farmer Supplies

2. (a) Principal office address of limited liability company: 5062 NE 122nd Drive
Okeechobee, FL 34972
(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company: 5062 NE 122nd Drive
Okeechobee, FL 34972
(Note: **MAY BE POST OFFICE BOX**)

December 2 2013
3. Date of filing/registration in Florida

L 13000166 466
4. Document number

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

Registered Agent:

United States Corporation Agents, Inc.

Registered Office Address:

13302 Winding Oak Court A.
Tampa, Florida 33612 US

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

Miguel Rodriguez

NEW Registered Office Address:

5062 NE 122nd Drive

(MUST BE FLORIDA STREET ADDRESS)

Okeechobee, FL 34972

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.

Miguel Rodriguez
Signature of a member or authorized representative of a member

Miguel Rodriguez
Printed or typed name of signee

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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.

Miguel Rodriguez
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00