

L14000001512

Florida Department of State
Division of Corporations
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(((H14000196901 3)))



H140001969013ABC*

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To:

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

From:

Account Name : GILLIGAN, GOODING & FRANJOLA, P.A.
Account Number : I20010000016
Phone : (352) 867-7707
Fax Number : (352) 867-0237

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

Email Address: gfranjola@ocalalaw.com

LLC REGISTERED AGENT CHANGE
STARS ALIGNED FARM, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
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14 AUG 21 AM 6:40

DIVISION OF CORPORATIONS
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14 AUG 21 AM 9:28

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stars Aligned Farms, LLC

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:

George Franjola, Esq.

Name of Person

Gilligan, Gooding & Franjola, P.A.

Firm/Company

1531 SE 36th Ave.

Address

Ocala, FL 34471

City/State and Zip Code

gfranjola@ocalalaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

George Franjola, Esq.

at (352)

867-7707

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

(((H14000196901 3)))

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: Stars Aligned Farms, LLC
2. (a) 9760 W. Hwy 316
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Reddick, FL 32686
- (b) 908 N. Eugene St.
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
Greensboro, NC 27401
3. 01/03/2014
Date of filing/registration in Florida
4. L14000001512
Document number
5. (a) William Allan King
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1531 SE 36th Ave.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Ocala, FL 34471
- (b) George Franjola
Enter name of NEW Registered Agent and/or NEW Registered Office address:
1531 SE 36th Ave.
NEW Registered Office Address:
Ocala, FL 34471

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.

Susan J Edwards
Signature of a member or authorized representative of a member

Susan J Edwards
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.

George Franjola
Signature of Registered Agent

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

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STATE
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