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(((H22000296050 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 : (888)705-7274 : (888)706-7274 Fax Number

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

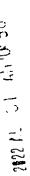
LLC REGISTERED AGENT CHANGE PARKS FARMS, LLC

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	COVER LETTER
TO: Registration Section Division of Corporations	
SUBJECT: Parks Farms, LL	С
30B3ECT.	ne of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Mary Castillo	
Name of Person	
Registered Agent Solutions, Inc.	
Firm/Company	
Corporate Center One, 5301 Southwes	st Pkwy, Ste 400
Address	
Austin, TX 78735	
City/State and Zip Code	
E-mail address: (to be used for future ann	nual report notification)
For further information concerning this matter,	please call:
Mary Castillo	888 705-7274
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327 Tallahassee, Florida 32314
2661 Executive Center Circle Tallahassee, Florida 32301	rananassee, monta 32514
Enclosed is a check for the following	amount:
□ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

15129570210

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. Na	me of the limited liability company: Parks Farm	าร, เ	LC		=		
	68 PONTE VEDRA CIRCLE		_{ь)} 5829 I	NW 158T	H ST		
2. (4)	Principal office address of limited liability company:	Mailing address of limited					
	(Note: MUST BE STREET ADDRESS) PONTE VEDRA BEACH, FL 32082)	ΜΙΔΙΜ	(<u>Note: MAYBI</u> LAKES,			<u>0.0</u>
	PONTE VEDICA BEACH, TE 32002	_	1011/-(1011	LAILO,			
	12/30/2015	_	L16000	0000863			
3.	Date of filing/registration in Florida	4.		Document nur	nber		
5. (a)	Richardson, Charles						
.). (d)	Registered Agent and Registered Office shown on the records of th	e Flori	da Dept, of State	·			
	5829 NW 158th St						
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRE.	<u>22)</u>	•			
	Miami Lakes	330	14	.	TALI OBS	2022	
(b)	Registered Agent Solutions, Inc.				語言	2022 AUG 3 I	<u>خ</u> بس
, ,	Enter name of NEW Registered Agent and/or NEW Registered C	office a	ddress:	•			
	155 Office Plaza Dr.					PH 4:	D) \r
	NEW Registered Office Address:					ن ب	
	Suite A						
	Tallahassee, FL	323	01				
the cha agent w	mited liability company is not organized under the laws nge or changes are made, the Florida street address of t fill be identical. Or, in the case of a Florida limited liab	he reg bility (istered office company, it is	e and the busing s hereby confir	ess office med that t	of the he cha	registered inge(s)

the articles of organization or the operating agreement of the limited liability company.

/s/	Charles Richardson	Charles Richardson	Manager	
	Signature of a member or authorized representative of a member	Printed or typ	ed name of signee	

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.

Mackenzie Hart, Asst. Secretary

Signature of a member or authorized representative of a member

Signature of Registered Agent