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## COVER LETTER

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TO: Registration Section Division of Corporatio	ns				
SUBJECT: Hall's Farm LL	c				
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agen	t/Registered Office Change a	and fee(s) are submitted for filing.			
Please return all correspondence	ee concerning this matter to t	he following:			
Astrid Hall					
Name	of Person				
Hall's Farm LLC					
Firm/0	Company	<del></del>			
11302 SE US HWY 301					
Add	ress				
Hawthorne, FL 32640					
City/State	and Zip Code	<del></del>			
scheerhall@hotmail.com					
E-mail address: (to be us	ed for future annual report no	otification)			
For further information concer	ning this matter, please call:				
Astrid Hall	352	215-3825			
Name of Perso		Area Code & Daytime Telephone Number			
STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, Florida 3	ons r Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check f	nclosed is a check for the following amount:				
□ \$25 Filing Fee		\$55 Filing Fee & Certified Copy			
INHS18 (2/14)					

## 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: Hall's Farm,	LLC	
2. (a)		(b)	
. ,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	11302 SE US HWY 301	113	02 SE US HWY 301
	Hawthorne, FL 32640	Haw	vthorne, FL 32640
	12/08/2016	L160	00222281
3.	Date of filing/registration in Florida	4.	Document number
<b>5</b> (a)	United States Corporation Agents, Inc.		
5. (a)	Registered Agent and Registered Office shown on the records o	f the Florida Dept.	of State:
	Registered Office Address (MUST BE FLORIDA STREET  13302 Winding Oak Court A	"ADDRESS)	<u> </u>
	Tampa, F	L33612	
(b)	Astrid Hall  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office address:	
	NEW Registered Office Address:		<del></del>
	11302 SE US HWY 301		
	Hawthorne, F	<sub>L</sub> 32640	
the cha agent was/w	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles bitorganization or the operating agreement of the	aws of the State of the registered liability compar of the limited I	l office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company.  [all
Signa	ature of a member or authorized representative of a member	_	Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple- ligations of my position as registered agent as provid- ely feflect a change in the registered office address, differentian of this change.	gree to act in th te performance led for in Chapt I hereby confirn	is capacity. I further agree to comply with the of my duties, and I am familiar with and accep er 605, F.S. Or, if this document is being filed n that the limited liability company has been
Signatu	me of Registered Agent		

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