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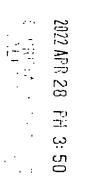
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: DUNCAN FARMS, Lo Name of Limited Lia	bility Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fe	ee(s) are submitted for filing.
Please return all correspondence concerning this matter to the fo	llowing:
DIANE M FREANEY Name of Person	-
DMF IRA LLC Firm/Company	<u>-</u>
2336 SE OCEAN BLVD #230 Address	2
STUART FL 34996-3310 City/State and Zip Code	2022 AFR 2
E-mail address: (to be used for future annual report notific	
For further information concerning this matter, please call:	्र । । - । - । - ।
DIANE M FREANEY at (323) Name of Person) 632 - 6638 Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

Enclosed is a check for the following amount:

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: DUNCAN FARMS, LLC
2. (a) 2836 SE OCEAN BLVS #230 (b) 2336 SE OCEAN BLVD #230 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
STUART, FL 34996-3310 STUART, FL 34996-3310
3. Date of filing/registration in Florida 4. Document number
3. Date of filing/regisfration in Florida 4. Document number
5. (a) FREAMEY DIAME M Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
5TUART .FL 34996
(b) FREANEY DIANE M Enter name of NEW Registered Agent and/or NEW Registered Office address:
DMF IRA LLC NEW Registered Office Address:
2336 SE OCEAN BLUD #230
STUART FL. 34996-3310
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.
^ · · · ·
Signature of a member DIANE M FREANEY Printed or typed 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.
Signature of Registered Agent