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COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: _______ Tarbert Paulownia Growers 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:

Lori Arnold

Name of Person

Spencer Fane LLP

Firm/Company

1000 Walnut Street, Suite 1400

Address

Kansas City, MO 64106

City/State and Zip Code

larnold@spencerfane.com

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

at (

For further information concerning this matter, please call:

Lori Arnold

Name of Person

<u>816</u>) <u>292-8243</u>

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

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

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.

2. (a)	4979 Joewood Drive	_	(b)	4979 Joewood Drive	
(<u>Note:</u> M	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Sanibel, FL 33957		-	Sanibel, FL 33957	
	October 7, 2019		_		
	Date of filing/registration in Florida	4.		Document	number
i. (a)	CT_Corporation_System Registered Agent and Registered Office shown on the record	te of the file		Last of States	اهيت 12
		ry of the file	, itta 17	ejn. of state,	
	1200 South Pine Island Road				
	Registered Office Address (<u>MUST BE FLORIDA STRE</u>	<u>ET ADDR</u>	<u>ESS)</u>		
					بر الم
	Plantation	. FL	3324	<u> </u>	۲. در ۲ <u>۰</u> در ۱
	Co				
(b)	Spenserv, Inc.			<u>-</u>	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>	ered Office	addro	<u>(88</u>)	
	201 North Franklin Street, Suite 2150				
	NEW Registered Office Address:	_	_		
				<u>.</u>	
	Tampa	.FL	<u>3</u> 3602	-5627	
ange gent w as/we ie artic	mited liability company is not organized under the or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the membe eles of organization or the operating agreement of t	the regist Hiability rs of the l	ered o comp limite	office and the busines oany, it is hereby con- d liability company o	ss office of the registered
	loga de la companya d	-	homas	D. Tarbert, Presid	ient
Signati	mature of a member or authorized representative of a member			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.

R-1J-thenky

Signature of Registered Agent

Spenserv, Inc., by: Paul J. Hanley, Vice President

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25,00