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COVER LETTER

Division of Corporations			
English Agricultural Services LLC SUBJECT:			
	ited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter	to the following:		
Cody H English			
Name of Person			
English Agricultural Services LLC			
Firm/Company			
5945 Last Chance Rd			
Address			
Milton, FL 32570			
City/State and Zip Code			
englishagservices@gmail.com			
E-mail address: (to be used for future annual repor	t notification)		
For further information concerning this matter, please ca	ıli:		
Olivía English 85	0 7486009		
Name of Person	Area Code & Daytime Telephone Number		
Mailing Address:	Street Address:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314	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		

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. N	ame of the limited liability company: English Agricult	ural Serv	ices LLC	·			 	
2. (a)								
2. (2)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	5945 Last Chance Road Milton, Fl 32570		5945 Last	Chance Rd Milton, FL 32570				
	March 09, 2021		L21000113	3677				
3.	Date of filing/registration in Florida	4.		Document number				
5. (a)	Cody H English							
(-,	Registered Agent and Registered Office shown on the records of	f the Flori	da Dept. of Sta	ΛĹĹ	(;*) [11]	2021 H AR		
	Registered Office Address (MUST BE FLORIDA STREET) 5945 Last Chance Rd	U I	F. 5.	MAR 29				
	Milton, F	L_32570		1 ' ((, (<u> </u> -			
(b)	Olivia B English Enter name of NEW Registered Agent and/or NEW Registered	ed Office a	ddress:	JRIDA	STATE	AH II: 17		
	NEW Registered Office Address:			_				
	5945 Last Chance Road							
	Milton, F	L						
chang agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited laterer authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	e registe liability of of the li- e limited	red office ar company, it mited liabili liability cor	nd the business office of is hereby confirmed the ity company or as othe mpany.	of the at the	regis chan	tered ge(s)	
		<u></u>	dy H English		C			
I here provis the ob to men notifie	eductor a member of authorized representative of a member selvy accept the appointment as registered agent and agitions of all statutes relative to the proper and completely reflect a change in the registered agent as providing a change in the registered office address, lead in writing of this change.	gree to ac e perforn ed for in hereby (ct in this cap nance of my Chapter 60 confirm that	Printed or typed name of pacity. I further agree of duties, and I am Jamil 15, F.S. Or, if this docust the limited liability ca	to cor	mnlv	with the ad accept ing filed a been	

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

The name and address of person(s) authorized to manage LLC:

Title: AMBR
[CODYBENGLISH7]

5945 LAST CHANCE ROAD
MILTON, FL. 32570 US

TUPO, H Should Say

Article V

The effective date for this Limited Liability Company shall be:

03/09/2021

Signature of member or an authorized representative
Electronic Signature: CODY ENGLISH

L21000113677

FILED 8:00 AM
March 09, 2021

Sec. Of State
shawkes

TUPO, H Should Say

Olivia B English

Plast ensure that this
form and Le correct this
Matter. Thank you I

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.