Division of Corporations

→ 18506176383



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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Account Name : REGISTERED AGENT SOLUTIONS INC

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

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

Email Address:_

LLC REGISTERED AGENT CHANGE FARMLAND PARTNERS INTERNATIONAL LLC

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INHS18 (2/14)

COVER LETTER

TO: Registration Section Division of Corporations	•	
30bJEC1.	s International LLC of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and feets) are submitted for filing.	
Please return all correspondence concerning this	•	
Mary Castillo		
Name of Person		
Registered Agent Solutions, Inc.		
Firm/Company		
Corporate Center One, 5301 Southwest	Pkwy, Ste 400	
Address		
Austin, TX 78735	·	
City/State and Zip Code		
E-mail address: (to be used for future annua	al report notification)	
For further information concerning this matter, p	lease call:	
Mary Castillo	888 705-7274	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Area Code & Daytime Telephone Number MAILING ADDRESS: Registration Section. Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following a	mount:	
□ \$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.

. Name of the limited lia	bility company: Famlai	nd Partne	ers Inte	rnational	LLC		<u> </u>
601 HERITA	GE DR	(b)	ant deditace no				
Principal office	address of limited liability company	"-	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
SUITE 489	<u>UST BE STREET ADDRESS</u>)		SUITE	-	21031011	1 (.1. 1)	<u> کیک</u>
	1 00450		JUPITER, AL 33458				
JUPITER, A	L 33458		JUPII	ER, AL 3	3430	_	
7/9/2021			L21000	314052			
. Date of fili	ng/registration in Florida	4.		Document nu	mber		
COOKE, W	LLIAM G.						
Registered Agent and R	egistered Office shown on the recor	ds of the Florida					
601 HERITA	AGE DRIVE		<u> </u>	_		٠	
Registered Office Addi	ess (MUST BE FLORIDA STR	EET ADDRESS			<u>:</u> -	2022	
		22450		_	<u> </u>	2022 MAY -3	3
JUPITER		_, _{FL} _3345		-		1	F >
(b) Registered	Agent Solutions, In	C.				3 PM	
Enter name of NEW R	egistered Agent and/or NEW Regi	stered Office add	lress:	_			;
155 Office I	Plaza Dr.		<u>:</u>	_	· -;		
NEW Registered Office	e Address:			•			
Suite A				-			
Tallahasse	<u> </u>	, FL 3230	1				

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

/s/ William G. Cook Manager

Signature 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.

Mackenzie Hart, Asst. Secretary

Signature of Registered Agent