

L99 0000001401

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

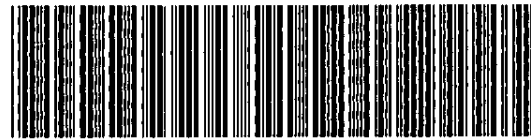
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**G. MCLEOD**

OCT 28 2011

**EXAMINER**



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10/27/11--01014--002 \*\*25.00

FILED  
11 OCT 27 PM 12:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Schipke Farm, 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:

Mike Albertson  
Name of Person

Schipke Farm, LLC  
Firm/Company

6634 N. 176th Avenue  
Address

Waddell, AZ 85355  
City/State and Zip Code

dmcphillips@hsami.com  
E-mail address (to be used for future annual report notification)

*also please  
note new  
address of  
LLC*

For further information concerning this matter, please call:

Debbie McPhillips at (602) 509-2775  
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

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**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 608.416 or 608.508, 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: Schipke Farm, LLC
2. (a) Principal office address of limited liability company: 3298 Beaver Avenue  
Spring Hill, FL 34609  
(Note: **MUST BE STREET ADDRESS**)
- (b) Mailing address of limited liability company: 6634 N. 176th Avenue  
Waddell, AZ 85355  
L9 900000 1401  
(Note: **MAY BE POST OFFICE BOX**)
3. Date of filing/registration in Florida: 3/8/99
4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
Registered Agent: Joseph Brown  
Registered Office Address: 11304 Musgrove Mill Dr.  
Spring Hill, FL 34609
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
**NEW Registered Agent:** Nadine Beam  
**NEW Registered Office Address:** 3298 Beaver Avenue  
(MUST BE FLORIDA STREET ADDRESS) Spring Hill, FL 34609

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.

Mike Albertson  
Signature of a member or authorized representative of a member

MIKE ALBERTSON  
Printed or typed name of signer

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 608, 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.

Nadine Beam  
Signature of Registered Agent

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