

From: Rob Royston
5/31/2019

Fax: (239) 205-2225

Tel:

Fax: (850) 617-6383

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Division of Corporations

Florida Department of State

Division of Corporations
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Account Name : ROBERT D. ROYSTON, JR., P.A.
Account Number : I20150000047
Phone : (239)205-2225
Fax Number : (239)205-2016

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

Email Address: rroyston@rroystonlaw.com

**LLC REGISTERED AGENT CHANGE
AG VENTURE, LLC**

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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: AG Venture, LLC

2. (a) 15 Cherry Hills Park Dr. (b) 15 Cherry Hills Park Dr.

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Englewood, CO 80113-7175

Englewood, CO 80113-7175

7/2/2010

M00000002241

3. Date of filing/registration in Florida

4. Document number

5. (a) Michael A. Ackerman

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

24311 Walden Center Dr.

Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)

Ste 100

Bonita Springs

FL 80113

(b) Robert D. Royston, Jr.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

12140 Carrissa Commerce Ct.

NEW Registered Office Address:

Suite 102

Fort Myers

FL 33966

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.

Michael A. Ackerman

Michael A. Ackerman, 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 to the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Robert D. Royston, Jr.

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00