

MD2000000710

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

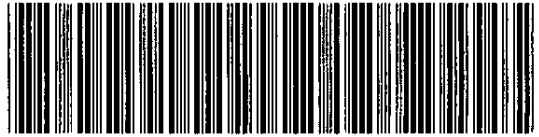
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300164284323

01/19/10--01064--030 \*\*25.00

FILED  
10 JAN 19 PM 12:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. O. 2010 JAN 20 2010

**FARMTON MANAGEMENT LLC  
ROOM 590  
410 N. MICHIGAN AVENUE  
CHICAGO, ILLINOIS 60611  
(312) 644-6720**

January 12, 2010

Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Farmton Management LLC  
Document Number M02000000710

Gentlemen:

Enclosed please find an executed Statement of Change of Registered Agent for the above foreign corporation. Also enclosed is a Miami Corporation's check in the amount of \$25.00 in payment of the filing fee. Please contact the undersigned with any questions.

Sincerely,



Barbra Goering  
Assistant Secretary

BG:dmm

Enclosure

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Farmton Management 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:

Barbra Goering  
Name of Person

Farmton Management LLC  
Firm/Company

410 N. Michigan Ave., Room 590  
Address

Chicago, IL 60611  
City/State and Zip Code

bgoering@miami-corp.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbra Goering at ( 312 ) 644-6720  
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: Farmton Management LLC

2. (a) Principal office address of limited liability company: \_\_\_\_\_



(Note: **MUST BE STREET ADDRESS**)

410 N. Michigan Ave., Room 590  
Chicago, IL 60611

(b) Mailing address of limited liability company: \_\_\_\_\_



(Note: **MAY BE POST OFFICE BOX**)

same

March 20, 2002

3. Date of filing/registration in Florida

M02000000710

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Earl M. Underhill

Registered Office Address:

1625 Osteen-Maytown Road

Osteen, FL 32764

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

Michael A. Brown

**NEW** Registered Office Address:

1625 Osteen-Maytown Road

**(MUST BE FLORIDA STREET ADDRESS)**

Osteen, FL 32764

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.

  
Signature of a member or authorized representative of a member

Barbra Goering

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 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.*

  
Signature of Registered Agent

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

FILING FEE: \$25.00