

M75011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

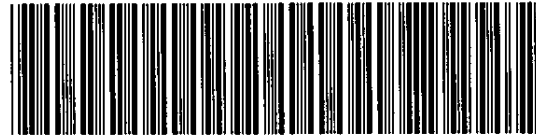
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/11/15--01007--015 **70.00

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15 MAR 11 AM 10:38

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15 MAR 11 AM 10:38

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 12 2015
T. CARTER

Paula M Sparkman
 Requestor's Name
 Messer Caparello, P.A.
 Post Office Box 15579
 Address
 Tallahassee, FL 32317 850/222-0720
 City/State/Zip Phone #

Attw:
LOE1

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Green Family Investment Company, LLC - L04000047476
 (Corporation Name) (Document #)
2. South Georgia Land Development Corporation - M75011
 (Corporation Name) (Document #)
3. _____
 (Corporation Name) (Document #)
4. _____
 (Corporation Name) (Document #)

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
<input checked="" type="checkbox"/>	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

Examiner's Initials

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: South Georgia Land Development Corporation
2. The principal office address: 261 A. Sherrod Road, Coolidge, GA 31738
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 4/1/1988 Document number: M75011
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Timothy J. Warfel
2015 Centre Pointe Boulevard, Suite 105
Tallahassee, FL 32308

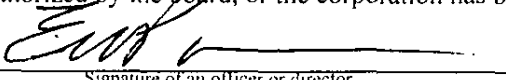
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Paula M. Sparkman
2618 Centennial Place
P.O. Box NOT acceptable
Tallahassee, FL 32308

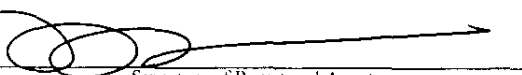
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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

 E. Wayne E. Parramore, President
Signature of an officer or director Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

 3/10/15
Signature of Registered Agent Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***