## P00000079216

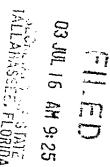
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	(Requestor's Name)
1	(Address)
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	(City/State/Zip/Phone #)
PICK-L	JP WAIT MAIL
<u> </u> 	(Business Entity Name)
	(Document Number)
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## TRANSMITTAL LETTER

то:	Amendment Section Division of Corporations
SUBJ	ECT: Valley View Farms (Name of corporation)
DOC	UMENT NUMBER: 100000079216
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
<u> </u>	(Name of person)
	(Name of firm/company)
	(507 C.R. 561 (Address)
	Clermont FL 34711 (City/state and zip code)
	ther information concerning this matter, please call:
	(Name of person) at (352) 243 0843 (Area code & daytime telephone number)
Enclo	sed is a \$35.00 check made payable to the Department of State.
Amen Divisi P.O. E	Address:  dment Section on of Corporations Ox 6327 assee, FL 32314  Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399
	Dear Amendment Section:

CR2E045(07/02)

this Corp. was dissolved for not filing an annual report in Spt 2001. I sent all the Corp. Reinstatement paperwork at the same time I sent this change of registered agent, we didn't receive any paperwork from the state or our current registered agent. Thanks

## 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	
in order to change its registered office or registered agent, or both, in the State	•
of Florida.  1. The name of the corporation: Valley View Facms  2. The principal office address: 6507 C.R. 561	
2. The principal office address: 6507 C.R. 561	
Clermont FL 3471)	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 8-22-00 Document number: 9000000192	16
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Fingneial Fundations Inc.	
Clearwater FL 33761 E	***
V. 2. − −	-
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Kirk Haines	
(P.O. Box or personal mailbox NOT acceptable)	
(P.O. Box or personal mailbox NOT acceptable)  Clermont FL 34711	
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.	
Kick W. Haves President	
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.	
7-6-03	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
(Typed or Printed Name) (Capacity)	

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