

PO1000068600

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

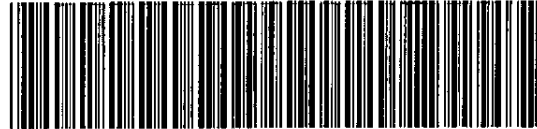
(Business Entity Name)

(Document Number)

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10/27/05 10:00 AM \*15.00

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

RAC

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: FIRST HARVEST INC  
(Name of Corporation)

DOCUMENT NUMBER: PO1000068600

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDY BIRO  
(Name of Person)

KETACO, LLC  
(Name of Firm/Company)

4940 STACK BLVD  
(Address)

MELBOURNE FL 32901  
(City/State and Zip Code)

For further information concerning this matter, please call:

ANDY BIRO at (850) 322-4438  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**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: FIRST HARVEST, INC.
2. The principal office address: 4990 STACK BLVD  
MELBOURNE FL 32901
3. The mailing address (if different): P.O. BOX 360892  
MELBOURNE FLA 32936-0892
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: P01000068600
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CURRY N. VAUGHAN  
1621 WILLARD ROAD N.W.  
PALM BAY, FLA 32907

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

ANDREW K. BIRD  
4990 STACK BLVD  
(P.O. Box NOT acceptable)  
MELBOURNE FL 32901

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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.

Andrew K. Bird  
(Signature of an officer or director)

ANDREW K. BIRD  
(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.

Andrew K. Bird  
(Signature of Registered Agent)

10-19-05  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314