## P12000067792

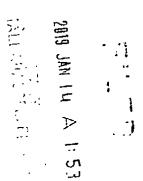
(Requestor's Name)
(Address)
·
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Confidence of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
•

Office Use Only



800323214678

01/14/19--01008--020 \*\*85.00



1/2/10105

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Mor-Joy Farms, Inc.
Name of Corporation
DOCUMENT NUMBER: P12000067792
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joyce Morin
Name of Contact Person
Mor-Joy Farms, Inc.
Firm/Company
6421 Duboise Dr.
Address
Clermont, FL 34714
City/State and Zip Code
joyce.morin@morjoyinc.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Joyce Morin 352 874-2346
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address:

Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida rochange its registered office or registered agent, or both, in the State of Florida.
	the corporation: Mor-Joy Farms, Inc.
2. The principal	office address: 6421 Duboise Drive, Clermont, FL 34714
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 8/3/2012 Document number: P12000067792
	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Joyce H. Morin
	8025 Ott Williams Road
	Clermont, FL
6. The name and (if changed):	8025 Ott Williams Road  Clermont, FL  I street address of the new registered agent (if changed) and /or registered office
	Diane Neuhauser
	6421 Duboise Drive
	PO Box NOT acceptable Clermont, FL 34714
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
Dru	Joyce H. Morin, President  Printed or typed name and title
I hereby accept I further agree i performance of agent. Or, if the	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Marsign	nature of Registered Agent Date
If signing on be	half of an entity:
T	yped or Printed Name
	* * * FILING FEE: \$35.00 * * *