P21000016857

(R€	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Dc	cument Number)	
Certified Copies	Certificates	of Status
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2021 HAR -8 AN 10: 24 SECRETARY OF STATE

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COVER LETTER

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TO:	Amendment Section Division of Corporations	÷.
ŞUBJE	CCT: F&M Harvesting Inc of Corporation	
Name o	of Corporation	
DOCU	MENT NUMBER: P21000016857	
The end	closed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please i	return all correspondence concerning this	matter to the following:
Maria H	lemandez	
Name o	of Contact Person	
Firm/C	ompany	
3178 Fo	ord Road	
Addres	S	
Lake W	orth Florida 33461	
City/Sta	ate and Zip Code	
	Herrera367965@gmail.com	
E-mail	address: (to be used for future annual	report notification)
For furt	ther information concerning this matter, p	please call:
Barbara	Jernigan	at (⁴²³) ⁴⁸³⁻³⁰⁴¹ Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclose	ed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address:
	P.O. Box 6327	Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, th hange is submitted for a corporation organized under the laws of the State of <mark>Florida</mark> der to change its registered office or registered agent, or both, in the State of Florida.	is ——
	of the corporation: F&M Harvesting Inc. al office address: 3178 Ford Rd, Lake Worth, FL 33461	
3. The mailing a	g address (if different):	
4. Date of incor	prporation/qualification: 02/16/2021 Document number: P21000016857	
5. The name and Florida Depart	nd street address of the current registered agent and registered office on file with the sartment of State: (If resigned, enter resigned)	
	Maria Hernandez	
	3178 Ford Road	
	Lakewood FL 33461	
6. The name and (if changed):	Lakewood FL 33461 SECRETARY And street address of the new registered agent (if changed) and /or registered of the PARY And	
		m
	2 P.O. Box NOT acceptable Lake Worth FL 33461	! ₹
The street address changed will	ress of its registered office and the street address of the business office of its registered ll be identical.	l agent,
	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
mei	7/	
Signatu I hereby accept	ture of an officer or director Printed or typed name and title	
mo	of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete performed I am familiar with and accept the obligation of my position as registered agent. Of eing filed merely to reflect a change in the registered office address. I hereby confirm as been notified in writing of this change. A phature of Registered Agent Date	ormance r, if this that the
If signing on be	pehalf of an entity:	
Mar	Typed or Printed Name	
	* * * FILING FEE: \$35:00 * * *	