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## **COVER LETTER**

Division of Corporations
SUBJECT: ESQUIRE FARMS 1993, INC. (Name of Corporation)
DOCUMENT NUMBER: P93000020988
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:
BERNARD JAMES (Name of Contact Person)
(Firm/Company)
3691 NW 15TH STREET (Address)
LAUDERHILL FL 33351 (City/State and Zip Code)
For further information concerning this matter, please call:
BERNARD JAMES at (754) 234-3631 (Area Code & Daytime Telephone Number)

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

TO:

Amendment Section



## 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 FLOQ.10A
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: FSQUIRE FARMS 1993, INC.
2. The principal office address: 3691 NW 15 <sup>TH</sup> STREET
LAUDERHILL FL 33313
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/22/1993 Document number: P930000 209 88
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
CHARLES SCHER  1900 CORPORATE BLUD # 400E  BOLD RATION F1 33431
1900 CORPORATE BLUD # 400E
BOCA RATION FL 33431
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
BERNARD JAMES
10335 NW 31st Court  (P.O. Box NOT acceptable)
SUNRISE FL 33351
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.
BERNARD JAMES, PRESIDENT (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.
(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

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