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## **COVER LETTER**

Division of Corporations
SUBJECT: Moore Farms, Inc. (Name of Corporation)
DOCUMENT NUMBER: P98000063345
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:
Kenneth B. Evers (Name of Contact Person)
Kenneth B. Evers, P.A. (Firm/Company)
Post Office Drawer 1308 (Address)
Wauchula, Florida 33873 (City/State and Zip Code)
For further information concerning this matter, please call:
Kenneth B. Evers at (863) 773-5600 (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

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

statement of char	rovisions of sections age is submitted for a to change its register	corporation o	organized	under the law	s of the State of _	Florida -	
		Moore		-	, in the blace of 14	oriu.	
<ol> <li>The name of the</li> <li>The principal of</li> <li>33873</li> </ol>	-			Wauchula,	, Florida		
3. The mailing ac	ldress (if different):						
4. Date of incorp	incorporation/qualification:Document number: P98000063345						
5. The name and Florida Depart	street address of the oment of State:	urrent registe	red agent	and registered	l office on file wit	h the	
	Louise D.	. Wilkin	son			_	
	One Lake	Morton	Drive			TAREC SO TI	
Lakeland, Florida 33801						器とこ	
6. The name and (if changed):	street address of the r	new registered	l agent (if	changed) and	/or registered offi	SSEE FI	
	Kenneth E	B. Evers		-		927	
		424 W Main Street					
	Wauchula,	O. Box NOT according Florid		3-1308			
The street address as changed will	ss of its registered of be identical.	fice and the s	treet addr	ess of the bu	siness office of its	s registered agent,	
Such change was authorized by the	s authorized by resole board, or the corpo	ution duly ad ration has be	lopted by en notifie	its board of d I in writing o	lirectors or by an of the change.	officer so	
Kenne	e of an officer or director)	rore	_	Kennet (Prin	h I. Moore led or typed name and t	President	
I further agree to of my duties, and document is bein	the appointment as r to comply with the pr d I am familiar with a ug filed merely to ref been notified in writ	ovisions of ai and accept th lect a change	i statutes e obligati in the res	ree to act in trelative to the on of my post istered office	this capacity. e proper and com ition as registered e address, I hereb	aplete performance I agent. Or, if this ny confirm that the	
Kucatt	BE			10-	30-06 (Date)		
(Sigi	nature of Registered Agent)		-		(Dale)		
If signing on bel	nalf of an entity:						
Kenneth B	yped or Printed Name)			:			
(1)	gree or a rising russey	* * * FILIN	G FEE: S	35.00 * * *			

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

CR2E045 (8/05)