568908

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

Office Use Only



100137119641

10/27/08--01030--020 **35.00

OB NOV 10 PM 2: 54

William In

COVER LETTER

TO: Amendment Section Division of Corporations

| SUBJECT: AS IIN FARMS, INC. (Name of Corporation) |
|---|
| DOCUMENT NUMBER: S68908 |
| |
| 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: |
| |
| J. Stephen Gardner (Name of Contact Person) |
| (Name of Contact Person) |
| |
| GARDNER LAW GROUP, P.A. |
| (Firm/Company) |
| |
| 101 S. Franklin Street, Suite 101 |
| (Address) |
| |
| T |
| Tampa, FL 33602 (City/State and Zip Code) |
| |
| For further information concerning this matter, please call: |
| 1 Stanban Cardner (4 912) 676 9090 |
| J. Stephen Gardner at (813) 676-8080 (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



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 3, 2008

J. STEPHEN GARDNER 101 S. FRANKLIN STREET SUITE 101 TAMPA, FL 33602

SUBJECT: ASTIN FARMS, INC.

Ref. Number: S68908

We have received your document for ASTIN FARMS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Letter Number: 508A00055885

Carol Mustain Regulatory Specialist II

Division of Cornerations - P.O. BOX 6327 - Tallahassee, Florida 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: ASTIN FARMS, INC. |
| 2. The principal office address: 107 Holloway Road |
| Plant City, FL 33567 |
| 3. The mailing address (if different): P. O. Box 3837 |
| Plant City, FL 33563 |
| 4. Date of incorporation/qualification: 07/22/1991 Document number: S68908 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) |
| J. Stephen Gardner |
| 220 South Franklin Street |
| Tampa, FL 33602 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| J. Stephen Gardner |
| 101 S. Franklin Street, Suite 101 (P.O. Box NOT acceptable) |
| Tampa, FL 33602 |
| 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. |
| authorized by the board, of the corporation has been not need in writing of the change. |
| (Signature of an officer or director) (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. |
| I Shuli aidel 10/15/or |
| (Signature of Registered Agent) (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 CR2E045 (8/05)