109715

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T. Roberts JAN 1 0 2000

COVER LETTER

Division of Corporations SUBJECT: FLORIDA AGRI-CHEMICAL CORPORATION (Name of Corporation) DOCUMENT NUMBER: V09715 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 W. REVELL (Name of Contact Person) (Firm/Company) 1647 INDIAN WOMAN RD. (Address) SANTA ROSA BEACH, FL 32459 (City/State and Zip Code) For further information concerning this matter, please call: KENNETH W. REVELL (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address: Street Address:** Amendment Section Amendment Section **Division of Corporations**

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

CR2E045 (8/05)

TO:

Amendment Section

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

statement of cha	ange is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes ized under the laws of the State of FLORI red agent, or both, in the State of Florida.	DA	
1. The name of	the corporation: FLORIDA AGRI-CHEMIC	AL CORPORATION		
2. The principal	office address: 1647 INDIAN WOMAN RE).		
SANTA RO	SA BEACH, FL 32459			
3. The mailing a	address (if different): (SAME)		,,,	
4. Date of incor	poration/qualification: 1/27/92	Document number: V09715		
	d street address of the current registered agriment of State:	gent and registered office on file with the	SE SE	
	KENNETH W. REVELL		LACE NE	
	612 WISTERIA ST		TARY HASSE	
	PANAMA CITY BEACH, FL 32407			
6. The name and (if changed):	d street address of the new registered agen	t (if changed) and /or registered office	OF STATE EE. FLORIDA	
	KENNETH W. REVELL			
	1647 INDIAN WOMAN RD.			
(P.O. Box NOT acceptable)				
	SANTA ROSA BEACH, FL 3245	9		
The street address changed will	ess of its registered office and the street is be identical.	address of the business office of its regis	tered agent,	
Such change wauthorized by t	as authorized by resolution duly adopted he board, or the corporation has been no	by its board of directors or by an officentified in writing of the change.	r so	
		KENNETH W. REVELL, PRES.		
I hereby accept	ure of an officer or difector) the appointment as registered agent and to comply with the provisions of all state and I am familiar with and accept the obling filed merely to reflect a change in the seen notified in writing of this change.	(Printed or typed name and title) d agree to act in this capacity. tes relative to the proper and complete p gation of my position as registered agen e registered office address, I hereby conf	performance t. Or, if this irm that the	
		JANUARY 2, 2008		
(Si	gnature of Registered Agent)	(Date)		
If signing on be	chalf of an entity:			
(Typed or Printed Name) * * * FILING FE	E: \$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)