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(Re	questor's Name)	
		
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(Cit	y/State/Zip/Phone	<i>≆</i> #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

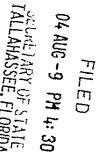


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RAI ROICHANGE



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Kendall Farms Nursery, Inc. (Name of corporation)
DOCUMENT NUMBER: PO300003358
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:
Vincent Chen (Name of contact person) Kendall Furms Nursery, Inc. (Firm/Company) 5955 Ponce de Leon Blud. (Address)
Coval Gables FL 33146 (City/state and zip code)
For further information concerning this matter, please call:
Vincent Chen (Name of contact person) at (305) 661 6561 (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 409 E. Gaines Street Tallahassee, FL 32399

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: Kendall Farms Nursery, Inc.
2. The principal office address: 10905 SW 95 Street
Miami FL 33176
3. The mailing address (if different): C/D VINCENT Chen
5955 Pance le Lean Blod, Com Gubies FL 30146
4. Date of incorporation/qualification: 1/29/12083 Document number: P03000003398
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Sherman, B. Lawrence
10905 SW 95 Street ==================================
Miami Fr 23176
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
5955 Ponce de Leon Blut
(P.O. Box NOT acceptable)
Coval Gables FL 37146
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. Vincent Chan (Signature of an officer of 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.
(Signature of Registered Agent) July 16 2004 (Date)
If signing on behalf of an entity:
Vincent Chen (Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *