## P03000080867

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





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SECRETARY OF STATE SALL AHASSEE, FLORIDA

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: SW LAND SCAPING SERVICE, INC. (Name of Corporation)
DOCUMENT NUMBER:
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:
(Name of Contact Person)
SW LANDSCAPING SERVICE, INC. (Firm/Company)
110 SHORELINE AVE. (Address)
SATSUMA FL. 32/89 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (386) 325 - 8349  (Area Code & Daytime Telephone Number)

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327

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

Tallahassee, FL 32314

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

. TO:

## 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 statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.	•	
1. The name of the corporation: S.W LANDS (APING SERVICE INC.		
2. The principal office address: //o SHURELINE AVE.		
SATSUMA, F.L. 32189		
3. The mailing address (if different): SAME	<u> </u>	<del></del>
4. Date of incorporation/qualification: 7/23/03 Document number: Po 30000	80867	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:		
Leann Wilkerson :		
930 BARON RO		
ORLANDO, FL 32828	<del>ci</del> l	_
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	SECRETARY ( ALLAHASSEE	08 FEB
EARL J. HEISEY	ARY 15SE	-7
110 SHORELINE PUE.  (P.O. Box NOT acceptable)	<del>С, Р</del>	3
	HO.	<del></del>
SATSUMA, FL 32/89	ZE ZE	•
The street address of its registered office and the street address of the business office of its regist as changed will be identical.	ered agent,	
Such change was authorized by resolution duly adopted by its board of directors or by an officer authorized by the board, or the corporation has been notified in writing of the change.	' so	
(Signature of an officer op parector)  EARL J, HEISEY  (Printed or typed name and title)		
- 47		
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 p of my duties, and I am familiar with and accept the obligation of my position as registered agent document is being filed merely to reflect a change in the registered office address, I hereby confi corporation has been notified in writing of this change.	verformance Or, if this irm that the	<b>,</b> ,
Garl Heiser 2-5-08 (Bignature of Registered Agent) (Date)		
Contract Segment Segment Agent) 2-3-08 (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)

APPROVED