|  |                            |                | ,           | Certificate of Status Desi | reu. res   |
|--|----------------------------|----------------|-------------|----------------------------|------------|
| Name and Address of Current Registered Agent:  |                            |                |             |                            |            |
| DIAZ, MAYKEL<br>4810 NW 186TH ST<br>MIAMI, FL 33055 US   |                            |                |             |                            |            |
| The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. |                            |                |             |                            |            |
| SIGNATURE: MAYKEL DIAZ   |                            |                |             |                            | 03/31/2016 |
|  | Electronic Signature of Re | gistered Agent |             |                            | Date       |
| Officer/Director Detail :  |                            |                |             |                            |            |
| Title  | Р                          | Title          | ;           | VP                         |            |
| Name   | DIAZ, MAYKEL               | Nan            | ne          | TORRES, ROSANA             |            |
| Address  | 4810 NW 186TH ST           | Add            | ress        | 4810 NW 186TH ST           |            |
| City-State-Zi  | p: MIAMI FL 33055          | City           | -State-Zip: | MIAMI FL 33055             |            |
|  |                            |                |             |                            |            |

**Current Mailing Address:** 

DOCUMENT# P14000059968

Entity Name: LONDON LAWN CARE INC

**Current Principal Place of Business:** 

P.O. BOX 28353 HIALEAH. FL 33002

4810 NW 186TH ST MIAMI, FL 33055

## FEI Number: 47-1350037

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## I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: MAYKEL DIAZ

Electronic Signature of Signing Officer/Director Detail

FILED Mar 31, 2016 **Secretary of State** CC7645722658

Certificate of Status Desired: Yes

03/31/2016 Date

# 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

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