

# LD1000007418

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
DEC 20 2011  
EXAMINER



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December 15, 2011

**VIA U.S. MAIL**

Florida Department of State  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE:   *Michaels Nursery LLC  
J-G Equities, L.L.C.***


Ladies and Gentlemen:

Enclosed for filing are Statements of Change of Registered Office or Registered Agent or Both for the above-referenced companies. Please file these documents with your department as soon as possible and send evidence of the filings to the undersigned in the envelope provided. A check in the amount of \$50.00 is enclosed to cover the filing fees.

Thank you for your assistance in this matter. If you have any questions, please call.

Very truly yours,

QUARLES & BRADY LLP

  
Debra A. Millinowisch  
Paralegal

Enclosures

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Michaels Nursery LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Debra Millinowisch

Name of Person

Quarles & Brady LLP

Firm/Company

300 N. LaSalle St., Suite 4000

Address

Chicago, IL 60654

City/State and Zip Code

jimleider@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debra Millinowisch

Name of Person

at ( 312 )

715-5000

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Michaels Nursery LLC

2. (a) Principal office address of limited liability company: 8325 State Road 7

(Note: **MUST BE STREET ADDRESS**) Boynton Beach, FL 33472

(b) Mailing address of limited liability company: 8325 State Road 7

(Note: **MAY BE POST OFFICE BOX**) Boynton Beach, FL 33472

5/10/2001  
3. Date of filing/registration in Florida

L01000007418  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Naples-Lawdock, Inc.

Registered Office Address: 1395 Panther Lane  
Suite 300  
Naples, FL 34109

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent: M. James Leider

**NEW** Registered Office Address: 8325 State Road 7  
(**MUST BE FLORIDA STREET ADDRESS**) Boynton Beach, FL 33472

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

M. James Leider  
Signature of a member or authorized representative of a member

M. James Leider, Member  
Printed or typed name of signer

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

M. James Leider  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00