

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L02000027228

Entity Name: H & M NURSERIES, LLC

**FILED**  
**Feb 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

370 W. CAMINO GARDENS BLVD., SUITE 300  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

370 W. CAMINO GARDENS BLVD., SUITE 300  
BOCA RATON, FL 33432

**New Mailing Address:**

FEI Number: 81-0576022

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

HOUGH, WILLIAM  
370 W. CAMINO GARDENS BLVD., SUITE 300  
BOCA RATON, FL 33432 US

**Name and Address of New Registered Agent:**

MILLER, MARK  
370 W. CAMINO GARDENS BLVD., SUITE 300  
BOCA RATON, FL 33432 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: MARK MILLER

02/06/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM

Name: HOUGH, WILLIAM

Address: 370 W. CAMINO GARDENS BLVD., SUITE 300

City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WILLIAM HOUGH

MM

02/06/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date