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## SCOLARO, SHULMAN, COHEN, FETTER & BURSTEIN, P.C.

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April 5, 2005

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- O ALSO ADMITTED TO PA BAR
- " ALSO ADMITTED TO MI BAR
- † ALSO ADMITTED TO PA. AND NJ BAR.
- \*DALSO ADMITTED TO MA BAR

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MALSO ADMITTED TO GA BAR

## CERTIFIED MAIL/RETURN RECEIPT REQUESTED NO. 7004 2510 0001 4595 8236

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: Innovative Landscape Services, LLC

Dear Sir/Madame:

RICHARD 5. SCOLARO® BARRY M. SHULMAN

WILLIAM B. MAGNARELLI STEWART M MCGOUGH\*

ANTHONY J GRIZANTIO

RONALD A. MITTLEMAN

SUSAN FORTIN LESSER

RICHARD E. SCRIMALE

MICHAEL J. COMPAGNI

STEPHEN H. COHEN®

ALAN S. BURSTEIN\*\*

JEFFREY M. FETTER®

TED H WILLIAMS

SHARI R. COHEN

MARC 5 BECKMAN JEFFREY B. 5CHEER\*0

SUSAN L. KING\* too

BERNARD J. LAWLER (1940-1998)

CHAIM J JAFFE

Enclosed please find Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company, together with our firm check in the amount of \$25.00 for the filing fee.

Thank you for your attention to this matter.

Very truly yours,

SCOLARO, SHULMAN, COHEN, FETTER & BURSTEIN, P.C.

Dlove Brown

Diane Brown Paralegal

DEB/bad:257533.1

Enclosures

cc: Stewart M. McGough, Esq.

George G. Johnson, Jr.

## 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. The name of the limite	,	INNOVATIVE LANDSCAF	PE SERVICES, LLC
		mpany is: 5706 SE INEZ A	VE.
STUART, FLORIDA 34	4992		
February 28, 2005		L05000020185	5
3. Date of filing/registration	ion in Florida	4. Document nun	nber
5. The name of the register Florida Department of	ered agent and the regist State:	ered office address as shown o	on the records of the
•	NATIONAL CORPC	PRATE RESEARCH, LTD.	
	103 N. MERIDIAN S	Name STREET	
	TALLAHASEE, FL 3		
	City, S	State and Zip	
6. The name and address of	of the new registered ag	ent and/or office:	
	GEORGE G. JOHN	SON, JR.	
	5706 SE INEZ AVE.	lame	
		(P.O. Box NOT acceptable)	
	STUART	FL 34992	
	City, St	ate and Zip	
confirmed that after the chand the business office of liability company, it is her	nange or changes are matthe registered agent will be confirmed that the	nder the laws of the State of Fade, the Florida street address of the identical. Or, in the case of change(s) was/were authorized to otherwise provided in the armany.	of the registered office of a Florida limited I by an affirmative vote of
(Signature of a member or authorized representative of a member)		$= \frac{1}{2} $	
GEORGE G. JOHNSON, JR.			TO THE
(Printed or typed name of signee)			<i>₩</i>
I hereby accept the appoil comply with the provision and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm	ntment as registered ag s of all statutes relative d accept the obligations his document is being fi that the limited liability	ent and agree to act in this ca to the proper and complete pe of my position as registered a led to merely reflect a change company has been notified in	nacity. I further agree to erformance of my duties, igent as provided for in in the registered office writing of this change.
(Signature of Registered Agent)		<del></del>	

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

**FILING FEE: \$25.00** 

INHS18(10/99)