

(Requestor's Name)

(Address)

(Address)

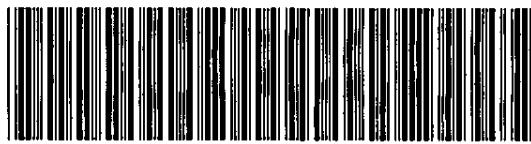
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

**Special Instructions to Filing Officer:**



400262358594

08/11/14--01030--024 \*455.00

RECEIVED  
LIBRARY, UNIVERSITY OF TORONTO  
AUG 12 2014

Office Use Only

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Garden House of Care 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:

**Ernestine Baugh**

Name of Person

**Garden House of Care LLC**

Firm/Company

**119 East St. Johns Terrace**

Address

**East Palatka, FL 32131**

City/State and Zip Code

**eebaugh44@yahoo.com**

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

For further information concerning this matter, please call:

**Ernestine Baugh**

at ( 386 )

**530-2410**

Name of Person

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 605.0114 or 605.0116, 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: Garden House of Care LLC

2. (a) 119 East St. Johns Terrace (b) 119 East St. Johns Terrace

Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*

Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*

East Palatka, FL 32131

East Palatka, FL 32131

May 4, 2012

L12000060361

3. Date of filing/registration in Florida

4. Document number

5. (a) Dewey E. Baugh Jr

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

119 East. St. Johns Terrace

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

East Palatka 32131

(b) Christina Buchanan

Enter name of NEW Registered Agent and/or NEW Registered Office address:

147 River Dr.

NEW Registered Office Address:

East Palatka 32131

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.

Ernestine Baugh

Signature of a member or authorized representative of a member

Ernestine Baugh

Printed or typed name of signee

*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 605, 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.*

Ernestine Baugh  
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00