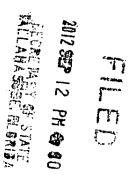
L12000093085

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:
	A. LUNT
	SEP 13 2012



400238370874

08/13/12--01023--018 **25.00



EXAMINER

Office Use Only



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 15, 2012

MALCOLM SPENCE 5013 IBIS PLACE COCONUT CREEK, FL 33073

SUBJECT: MALCOLM'S LANDSCAPING AND PLANT RENTALS LLC

Ref. Number: L12000092285



We have received your document for MALCOLM'S LANDSCAPING AND PLANT RENTALS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 312A00021048

COVER LETTER

TO: Registration Section Division of Corporations	
	ping and Plant Rentals L.L.C. ted Liability Company
Name of Limit	ted Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	te Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	
malcolm Spence	
Name of Person	STATE &
Malcolm's Landscaping and plant Rentals	s.L.L.C.
Firm/Company	
5013 lbis Place	
Address	
Coconut Crook El 22072	
Coconut Creek, FI 33073 City/State and Zip Code	
malolympics@att.net E-mail address: (to be used for future annual report notific	ation)
For further information concerning this matter, p	lease call:
Malcolm Spenceat	(954) 275-1813
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following an	mount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

 $\tilde{\sigma}^{I}:=A^{I}_{-1}$

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: Malcolm's la	andscaping and Plant Rentals L.L.C.		
2. (a) Principal office address of limited liability company	5013 Ibis Place		
(Note: MUST BE STREET ADDRESS)	Coconut Creek Florida 33073		
(b) Mailing address of limited liability company:	5013 Ibis Place		
(Note: MAY BE POST OFFICE BOX)	Coconut Creek, Florida 33073		
August 30,2012	L2000092285		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on a	the records of the Florida Dept. of State:		
Registered Agent:	UNITED STATES CORPORATION AGE		
Registered Office Address:	13302 WINDING OAK COURT &		
	TAMPA, FLORIDA 33612 №		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
NEW Registered Agent:	MALCOLM SPENCE		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5013 IBIS PLACE		
	COCONUT CREEK ,FL 33073		
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. Signature of a member or authorized representative of a member'			
MALCOLM SPENCE			
Printed or typed name of signee	_		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provision of all statutes relative to the province and I am familiar with and accept the obligations of my portugation of the complex of the complex states of the complex of	gree to act in this capacity. I further agree to sper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office was been notified in writing of this change.		
Signature of Registered Agent			
Division of Co rpor ations, P.O. Box 63 FILING FEE: \$2			

INHS18 (05/08)