

M10000002881

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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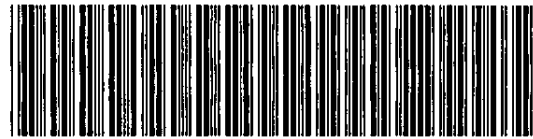
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 26 2013

J. BRYAN

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: EASTERN LANDSCAPING, 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:

SUSAN VON HOENE  
Name of Person

VON HOENE LAW FIRM, PLLC  
Firm/Company

P.O. BOX 1527  
Address

SANTA ROSA BEACH, FL. 32459  
City/State and Zip Code

SUSAN@VONHOENELAWFIRM.COM  
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan Von Hoene at (950) 622-4038  
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

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**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: EASTERN LANDSCAPING LLC
2. (a) Principal office address of limited liability company: 250 LYNN DRIVE  
(Note: **MUST BE STREET ADDRESS**) SANTA ROSA BEACH FL  
32459
- (b) Mailing address of limited liability company: 250 LYNN DRIVE  
(Note: **MAY BE POST OFFICE BOX**) SANTA ROSA BEACH FL  
32459
3. Date of filing/registration in Florida: 6/25/10
4. Document number: M10000002591

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

Registered Agent:

INCORD SERVICES

Registered Office Address:

17888 67th COURT NORTH  
LOXAHATCHEE, FL 33470

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

**NEW Registered Agent:**

ALICE DANIEL

**NEW Registered Office Address:**

(**MUST BE FLORIDA STREET ADDRESS**)

250 LYNN DR.  
SANTA ROSA BEACH  
FL 32459

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.

Alice Daniel  
Signature of a member or authorized representative of a member

ALICE DANIEL  
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity and 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.

Alice Daniel  
Signature of Registered Agent

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

FILING FEE: \$25.00

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