2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000002685

FILED Apr 13, 2012 Secretary of State

Entity Name: CELESTIAL THERAPEUTIC AND ORNAMENTAL GARDENS, INC.

Current Principal Place of Business: New Principal Place of Business:

11141 KEY HAVEN BLVD
JACKSONVILLE, FL 32218

13958 DUVAL ROAD
JACKSONVILLE, FL 32218

Current Mailing Address: New Mailing Address:

11141 KEY HAVEN BLVD 6759 BARTH ROAD

JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32219

FEI Number: 59-3613663 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PASCINTO-CRIDER, VERONICA J
11141 KEY HAVEN BLVD
6759 BARTH ROAD
1401 (2001) # 1401 F F 1 2004

JACKSONVILLE, FL 32218 US JACKSONVILLE, FL 32219 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: VERONICA J CRIDER 04/13/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PDS

 Name:
 CRIDER, VERONICA J

 Address:
 6759 BARTH ROAD

 City-St-Zip:
 JACKSONVILLE, FL 32219

Title: VD

Name: PASCIUTO, PATRICIA
Address: 11064 KEY MADEIRA DR
City-St-Zip: JACKSONVILLE, FL 32218

Title: VD

 Name:
 PEAK, ELIZABETH

 Address:
 1428 FOREST LANE

 City-St-Zip:
 JACKSONVILLE, FL 32259

Title: VD

Name: JEWETT, MICHELLE Address: 3353 RED ASH CIRCLE City-St-Zip: OVIEDO, FL 32766

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VERONICA J CRIDER PDS 04/13/2012