14980000 54G2

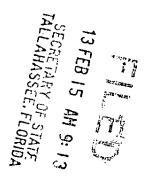
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

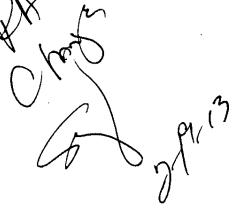
Office Use Only



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02/15/13--01013--028 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Taru Gardens, Inc.

Name of Corporation

DOCUMENT NUMBER: N9800005462

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person

Dharma Group, LC

Firm/Company

14 S. Swinton Avenue

Address

Delray Beach, FL 33444

City/State and Zip Code

kathy@goodwater.com

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

For further information concerning this matter, please call:

Kathy Kuchta

_,561 ,27

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida	
	er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: Taru Gardens, Inc.	
	l office address: 1180 Seminole Trail, Ste. 155	
	Charlottesville, VA 22901	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 9/21/1998 Document number: N9800005462	_
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	Sandi Morick	
	615 S L Street	
	Lake Worth, FL 33460	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office by the street address of the new registered agent (if changed) and /or registered office by the street address of the new registered agent (if changed) and /or registered office by the street address of the new registered agent (if changed) and /or registered office by the street address of the new registered agent (if changed) and /or registered office by the street address of the new registered agent (if changed) and /or registered office by the street address of the new registered agent (if changed) and /or registered office by the street address of the new registered agent (if changed) and /or registered office by the street address of the street addre	
	Kathy Kuchta	
	14 S. Swinton Avenue	
	P.O. Box NOT acceptable Delray Beach, FL 33444	
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Signatur	Kimberly Goodyear, President Printed or typed name and title	
· ·	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
Lafty	1 Luce 2/11/13 hature of Registered Agent 2/11/13	
	half of an entity:	
,	N/A	
	yped or Printed Name	

* * * FILING FEE: \$35.00 * * *