

P. Uxxxxx 34523

LAW OFFICES
STUTSMAN THAMES & MARKEY, P.A.
50 NORTH LAURA STREET • SUITE 1600
JACKSONVILLE, FLORIDA 32202



100181254591

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

05/28/10--01003--016 **35.00

FILED
2010 MAY 28 AM 8:53

RA
C/An
[Signature]

6-1-10

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Skinner Nurseries, Inc.
2. The principal office address: 9150-4 Philips Highway, Jacksonville, Florida 32256
3. The mailing address (if different): _____
4. Date of incorporation/qualification: April 1, 2000 Document number: P00000034523
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

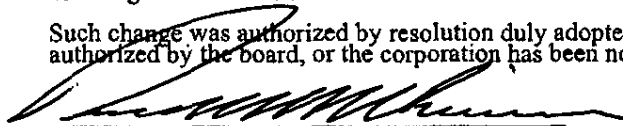
Russell R. Skinner
9150-4 Philips Highway
Jacksonville, Florida 32256

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Stutsman Thames & Markey, P.A.
50 North Laura Street, Suite 1600
P.O. Box NOT acceptable
Jacksonville, Florida 32202

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Russell R. Skinner, President
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

5/24/2010
Date

If signing on behalf of an entity:

Stutsman Thames & Markey, P.A.
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

2010 MAY 28 AM 8:53

FILED