

P01000107336

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GRIMALDI'S SPRINKLER SYSTEMS AND LANDSCAPE DESIGN, INC.
(Name of corporation)

DOCUMENT NUMBER: P01000107336

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:

Deborah Lee Jarrett
(Name of person)

Grimaldi's Sprinkler Systems and
(Name of firm/company) Landscape Design, Inc.

2633 N. Lecanto Highway

(Address)

Lecanto, FL 34461

(City/state and zip code)

900007797299--1
-09/17/02--01038--005
*****35.00 *****35.00

For further information concerning this matter, please call:

Deborah Lee Jarrett at (352) 527-6661
(Name of 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
409 E. Gaines Street
Tallahassee, FL 32399

FILED
02 OCT -2 PM 12:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E045(07/02)

R.A. change

T BROWN OCT - 3 2002

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FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

September 25, 2002

DEBORAH LEE JARRETT
GRIMALDI'S SPRINKLER SYSTEMS
2633 N. LECANTO HIGHWAY
LECANTO, FL 34461

SUBJECT: GRIMALDI'S SPRINKLER SYSTEMS AND LANDSCAPE DESIGN,
INC.
Ref. Number: P01000107336

We have received your document for GRIMALDI'S SPRINKLER SYSTEMS AND LANDSCAPE DESIGN, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 245-6869.

Teresa Brown
Document Specialist

Letter Number: 402A00054363

RECEIVED
12 OCT -2 AM 9:16
DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE
JIM SMITH
SECRETARY OF STATE

TERESA BROWN,

I'VE MADE THE REQUESTED CHANGES.

ROBERT J. ELDREDGE

RA NAME : ELDREDGE, ROBERT J
RA ADDR : 3580 E GULF TO LAKE HIGHWAY
INVERNESS, FL 34453

DEBORAH JARRETT
2633 N. LECANTO HYW
LECANTO, FL 34461
352-527-6661

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: GRIMALDI'S SPRINKLER SYSTEMS AND LANDSCAPE DESIGN, INC.
2. The principal office address: 2633 N. Lecanto Highway, Lecanto, FL 34461

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/07/2001 Document number: P01000107336

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Robert J. Eldredge

358 E GULF TO LAKE Highway

INVERNESS, FL 34453

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

Deborah Lee Jarrett

2633 N. Lecanto Highway

Lecanto, FL 34461
(P.O. Box or personal mailbox NOT acceptable)

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.

Deborah Lee Jarrett
(Signature of an officer, chairman or vice chairman of the board)

Deborah Lee Jarrett, 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.

Deborah Lee Jarrett
(Signature of Registered Agent)

September, 2002
(Date)

If signing on behalf of an entity:
Deborah Lee Jarrett
(Typed or Printed Name)

President/Registered Agent
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FILED
2002 OCT 2 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA