## P0200031758

(F	Requestor's Name)	
(4	Address)	
(/	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(0	Occument Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FEB 02 2015 T. CARTER

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Garden Gates Inc Name of Corporation		
DOCUMENT NUMBER: PO2000031758 Filed on 3/22/2002		
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:		
Rea Z Berg Name of Contact Person  Garden Gates, Inc Firm/Company		
2589 Coral Way West Address		
Daytona Beach, FL 32118 City/State and Zip Code		
reaberg@sbcglobal.net		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:    Rea Z Berg		
Name of Contact Person Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address: Street Address;		
Amendment Section Amendment Section  Division of Corporations Division of Corporations		
P.O. Box 6327 Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle		

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 29, 2014

REA Z BURG GARDEN GATES, INC. 2589 CORAL WAY WEST DAYTONA BEACH, FL 32118 US

SUBJECT: GARDEN GATES, INC. Ref. Number: P02000031758

We have received your document for GARDEN GATES, 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 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. 203 - 247 - 1880 (daylore #)

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.

If you are trying to change the registered agents last name along with the address you must list the change in section 6.

\* Made changes to Section 6 as requested Please call he at 203-247-1880 with Ruther questions.

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) 245-6050.

Tina D Carter Regulatory Specialist

Letter Number: 614A00027317

## 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
in order to change its registered office or registered agent, or both, in the State of Florida.  1. The name of the corporation: Garden Gales, Inc.
2. The principal office address: 2589 Goral Way West, Daytona Beach, Florida, 32118
3. The mailing address (if different): Same as abase
4. Date of incorporation/qualification: Morch, 22nd 2002 Document number: P02000081758
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)
REAZ Mohammed
1474 W. Branada Blud. 440/209 55 50
Ormond Beach, FL 32174
6) The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Rea Z. BERG
rices change: 2589 Goral Way West  P.O. Box NOT acceptable
Dougtona Beach, FL 32118
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.
Rea Z Berg   Director President
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.
F2 Z Z Z 2014
Signature of Registered Agent Date  If signing on behalf of an entity:
Typed or Printed Name

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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