P04000098690

| √ (Re | questor's Name) | |
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| (Ad | ldress) | |
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| (Cit | ty/State/Zip/Phone | : #) |
| PICK-UP | ☐ WAIT | MAIL |
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| (Bu | isiness Entity Nam | ne) |
| (De | ocument Number) | · |
| (50 | ocument Number) | |
| Certified Copies | Copies Certificates of Status | |
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| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE

R.A. Charge

G. Goulliette MAY 0 6 200

COVER LETTER

Amendment Section Division of Corporations

TO:

| SUBJECT: Grand Teton Corp | | | |
|--|--|--|--|
| (Name of Colporation) | | | |
| DOCUMENT NUMBER: P0400098690 | | | |
| 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: | | | |
| rease return an correspondence concerning and matter to the rone wing. | | | |
| Marc J Roggieri | | | |
| (Name of Contact Person) | | | |
| Lawn Doctor of Baynton Beach | | | |
| (Firm/Company) | | | |
| 3050 3W/4th Place | | | |
| (Address) | | | |
| Boynton Bach & 1 33426 | | | |
| (City/State and Zip Code) | | | |
| For further information concerning this matter, please call: | | | |
| (Name of Confact Person) at (SQ) 498-9898 (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 Street Address: Amendment Section Division of Corporations Clifton Building | | | |
| Tallahassee, FL 32314 2661 Executive Center Circle | | | |

Tallahassee, FL 32301

$\boldsymbol{\cdot}$ 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 1600 |
| in order to change its registered office or registered agent, or both, in the State of Florida. |
| 1. The name of the corporation: Grand letan (or p |
| 2. The principal office address: 3050 SW 14th P |
| Boynton Boots Al 33420 |
| 3. The mailing address (if different): 10, Box 7478 Lely bach + 33482 |
| 11111 |
| 4. Date of incorporation/qualification: 6/29/2004 Document number: 10400009864 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| Lannie Schwimmer |
| 703 Golf Ct Ass a |
| Delray Beach, Fl 33445 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| Marc J Rogieri = 50 = 5 |
| 12443 Clearfalls Dr |
| Bora Raton, +1 33428 |
| 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. |
| Marc Regieni - Hesidant (Printed of 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 dutien, 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. |
| 4/28/2 |
| (Signature of Registered Agent) (Date) |
| If signing on behalf of an entity: |
| (Typed or Printed Name) |
| (1) pod or i inica rigino) |

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