2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000100975

Entity Name: GREEN HOLLOW NURSERY, INC.

FILED Sep 02, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Current Principal Place of Business: New Principal Place of Business:

12013 CR 561 12013 CR 561

CLERMONT, FL 34711 CLERMONT, FL 34711 US

Current Mailing Address: New Mailing Address:

12013 CR 561 12013 CR 561

CLERMONT, FL 34711 CLERMONT, FL 34711 US

FEI Number: 16-1703169 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHRISTOPHER, COLLINS MR CHRISTOPHER, COLLINS T MR. 11103 LAKE KATHERINE CIRCLE 12013 CR 561

CLERMONT, FL 34711 CLERMONT, FL 34711 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CHRISTOPHER COLLINS 09/02/2009

> Electronic Signature of Registered Agent Date

> > Title:

PRFS

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRFS () Delete

COLLINS, CHRISTOPHER PRES COLLINS, CHRISTOPHER T PRES Name: Name: 11103 LAKE KATHERINE CIRCLE Address: Address:

12013 CR 561 City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: () Delete Title: CEO () Change (X) Addition

HERMANN, ERIN J MR. Name: Name: Address: Address: 12013 CR 561 CLERMONT, FL 34711 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER COLLINS **PRES** 09/02/2009