

P04000131919

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

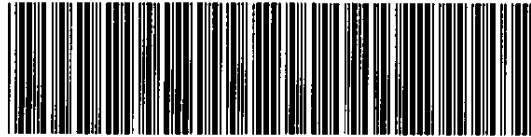
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200145878422

03/16/09--01031--022 \*\*35.00

FILED  
09 MAR 16 PM 12:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*R-A Charge*  
C.COULLETTE

MAR 17 2009

EXAMINER

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** \_\_\_\_\_

Home & Garden Lifestyles Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** \_\_\_\_\_

P04000131919

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:

Gail Sander

(Name of Contact Person)

Home & Garden Lifestyles Inc.

(Firm/Company)

5703 New 57 Ter

(Address)

Coral Springs, FL 33067

(City/State and Zip Code)

For further information concerning this matter, please call:

Gail Sander

(Name of Contact Person)

at

( 954 ) 575-0881

(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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: Home & Garden Lifestyles Inc.
2. The principal office address: 5103 NW 57 Terrace  
Coral Springs, FL 33067
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 9/13/04 Document number: PO4000131919
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)

Marc Sander  
2323 NE 26 Ave Suite 108  
Pompano Beach, FL 33062

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

Marc Sander  
5103 NW 57 Ter  
(P.O. Box NOT acceptable)  
Coral Springs, FL 33067

FILED  
09 MAR 16 PM 12:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

Gail Sander  
(Signature of an officer or director)

GAIL SANDER 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.

Marc Sander  
(Signature of Registered Agent)

3/9/09  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(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)