

P04000143364

(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



600043526176

01/05/05--01016--019 \*\*35.00

FILED  
05 JAN -6 PM 4:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RAch9  
CRB  
1/10/05

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Professional Touch Lawn Maintenance and landscape design

**DOCUMENT NUMBER:** P04000143364

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jason Hickman

(Name of Contact Person)

Professional touch lawn Maintenance and landscape design  
(Firm/ Company)

6878 nw 33rd street

(Address)

Margate , FL. 33063

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Jason Hickman

(Name of Contact Person)

at ( 954 ) 753-3072

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**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

**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: Professional Touch Law Maintenance and Landscape Design  
2. The principal office address: 6878 NW 33rd St Margate FL 33063

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: \_\_\_\_\_ Document number: P04000143364

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

Adrian Zullo  
8919 NW 28th Dr. Apt A  
Coral Springs FL 33065

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

Jason Hickman  
6878 NW 33rd Margate FL 33062  
(P.O. Box NOT acceptable)

FILED  
05 JAN -6 PM 4:17  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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.

[Signature]  
(Signature of an officer or director)

Jason Hickman  
(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.

[Signature]  
(Signature of Registered Agent)

1-4-05  
(Date)

If signing on behalf of an entity:

ADRIAN ZULLO  
(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