P05000013000

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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COVER LETTER

Amendment Section Division of Corporations Florahome Nunsery Inc.
(Name of Corporation) DOCUMENT NUMBER: 705000013000 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: (Name of Contact Person) Florahome Nunsery Inc. 1020 Alphonso Lane Venus, FC 33960 (City/State and Zip Code) For further information concerning this matter, please call: rpha M Hennan dez at (863) 441-4028 (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

TO:

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 <u>Florida</u> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Florahome Nunsery Inc
2. The principal office address: 1020 Alphonso Lane
Venus, FL 33960 = 5
3. The mailing address (if different): SAME AS ABOVE 50 E T
4. Date of incorporation/qualification: 1/25/2005 Document number: PO50080/3900
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Luis III. Hernandez
6575 SW 30th St.
Miam: , F1 33155
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Luis M Hennandez
1020 Alphonso Cane (P.O. Box NOT acceptable)
Venus, PC 33960
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.
Onpha on Herrandez
(Signature of an option or director) (Brinted 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.
_ Lyis M Hernan Cey (Signature of Registered Agent) (Date)
(Signature of Registered Agent) (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)