## P05000075942

(Rec	juestor's Name)	
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SECRETARY CONSORNATIONS 33

## **COVER LETTER**

SUBJECT:	FLORIDA LAWN CAPE INC. (Name of Corporation)
	(Name of Corporation)
DOCUMENT	NUMBER: P050000 15942
The enclosed St	atement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all	correspondence concerning this matter to the following:
	BROCK MILLER— (Name of Contact Person)
	(Name of Contact Person)
	Florida lawn Care (Firm/Company)
	(Time Company)
·	606 Park Ave Suite 802 (Address)
	(Address)
	City/State and Zip Code)
	(City/State and Zip Code)
For further infor	mation concerning this matter, please call:
BROC	K MILLER III ADM > 8/0/0 8/093
<del></del>	Name of Contact Person) at (904) 866. 8693  (Area Code & Daytime Telephone N

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:

Amendment Section **Division of Corporations** 

## 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
1. The name of the corporation: FWPIRA LAWN CAPE, INC.
2. The principal office address: PO BOX U5549
OPANGE PARK FL 32065
3. The mailing address (if different):
4. Date of incorporation/qualification: MAY24, 2005 Document number: P05000075942
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
EFIN LMILLEIZ
4943 AUSTRIAN CT.
OPANGE PARK FL 32003
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
1 Joseph 7 Miller
606 park Ave suite 802  (P.O. Box NOT acceptable)
Orange Park FL 32065
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.
BUN LMIUER
(Signature of an officer or director)  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.
Social Estables 6-25-07 (Date)
If signing on behalf of an entity:
Brock EMiller
(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