

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000121351

Entity Name: F & M NURSERY INC.

FILED
Nov 21, 2008
Secretary of State

Current Principal Place of Business:

34851 SW 214TH AVE,
HOMESTEAD, FL 33034

New Principal Place of Business:

34851 SW 214TH AVE,
HOMESTEAD, FL 33034 US

Current Mailing Address:

330 NW 15TH ST.
HOMESTEAD, FL 33030

New Mailing Address:

330 NW 15TH ST.
HOMESTEAD, FL 33030 US

FEI Number: 20-5589728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUBIZARRETA, FLORENTINO
330 NW 15TH ST.
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

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: FLORENTINO ZUBIZARRETA

Electronic Signature of Registered Agent

Date

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: PD () Delete
Name: ZUBIZARRETA, FLORENTINO
Address: 330 NW 15TH ST.
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ZUBIZARRETA, FLORENTINO
Address: 330 NW 15TH ST.
City-St-Zip: HOMESTEAD, FL 33030 US

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: FLORENTINO ZUBIZARRETA

P

11/21/2008

Electronic Signature of Signing Officer or Director

Date