## P07000050853

(Requestor's Name)			
(Address)			
, (Address)			
(City/State/Zip/Phone #)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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## **COVER LETTER**

TO: Amendment S Division of Co	ection orporations		
SUBJECT:	Sunshine Hardson (Name	of Corporation)	
DOCUMENT NUMBER: P070000 50 8 53			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all corres	spondence concerning this n	natter to the following:	
_	DAN W (Name o	of Contact Person)	
	(Fir	m/Company)	
267 E. Lakeview St (Address)			
	Umatilla	FC 32784 ate and Zin Code)	
(,			
For further information concerning this matter, please call:			
Dan W (Name	of Contact Person)	at (352) 516-89 • 8 (Area Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Department of State.			
	Mailing Address: Amendment Section Division of Corporation 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 lovide in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Sunshine Handscapes INC.
2. The principal office address: 19925 CR 450  Umatilla Fr 32784
3. The mailing address (if different): Po Box 2425  Unatilla, FL 32787
4. Date of incorporation/qualification: 4/24/07 Document number: P0700050853
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Alene Robbins
19925 CR 450
Umatilla, FC 32784
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Rebecca Boyce
Kebecca Doyce
Rebecca Boyce  19925 CR 450  (P.O. Box NOT acceptable)  Umatilla, PC 32784
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 of an officer or director)  Joel Stalo GM (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.
Relica Regisered Agent)  7/2/07 (Signature of Regisered Agent)  (Date)
(Signature of Registred Agent)  If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

\* \* \* FILING FEE: \$35.00 \* \* \*.