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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Garsen Garden, Inc. Name of Corporation
DOCUMENT NUMBER: EIN - 26 - 1086285
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:
Tacqueline Claeyssen Name of Contact Person
Garssen Garden, Inc Firm/Company
2901 SW 121 AV Address
Miami, F. 33175 City/State and Zip Code
garssen garden @ gmail- com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jacqueline Claeyssen at 305, 298-8586 Name of Contact Person Area Code & Daytime Telephone Number
7.100 Court of Dayline 1 Copyright 1 Copyr
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

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 $\frac{\text{Florida}}{\text{Constant}}$
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Garssen Garden, Inc
2. The principal office address: 2901 SW /21 AV
Miami, FL 33175
3. The mailing address (if different): P. O. Box 650142
Miami, Fr 33265
2. The principal office address: $2701 \text{ SW} / 21 \text{ AV}$ $\cancel{\text{Miami}}$, $\cancel{\text{FL}} 33175$ 3. The mailing address (if different): $\cancel{\text{P}} 0$. $\cancel{\text{Box}} 650142$ $\cancel{\text{Miami}}$, $\cancel{\text{FL}} 33265$ 4. Date of incorporation/qualification: $\cancel{9}-\cancel{17}-\cancel{07}$ Document number: $\cancel{\text{EiN}}-2\cancel{\text{L}}-\cancel{1086285}$ $\cancel{\text{Po}}\cancel{\text{T}}\cancel{\text{COO}}/\cancel{\text{D}}\cancel{351}$
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Heberth J. Garcia
Heberth J. Garcia 2901 SW 121 Al
Miami, F. 33175
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Jacqueline Claeyssen 2901 SW 121 AV P.O. BOX NOT acceptable
2901 SW 121 AV
P.O. Box NOT acceptable
Moamu, Fi 33175
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 Signature of an officer or director Signature of an officer or director Final or typed name and tiple
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.
2 06/20/13
Signature of Registered Agent Date
If signing on behalf of an entity:
10
Typed or Printed Name

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