

Division of Corporations

Page 1 of 1

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

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**To:**  
Division of Corporations  
Fax Number : (850) 617-6380

**From:**  
Account Name : BUSINESS FILINGS  
Account Number : 105256001620  
Phone : (808) 827-5300  
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TALLAHASSEE, FLORIDA

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**REGISTERED AGENT CHANGE  
VICTORY GARDEN STRATEGIC, INC.**

Certificate of Status	0
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**JAN 18 2013**

**T. LEWIS**

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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 Florida \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Victory Garden Strategic, Inc.
2. The principal office address: 6900 Daniels Pkwy, Ste. 29-323, Fort Myers, Florida 33912
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 8/24/2009 Document number: P09000071014
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)

MAHAN, RONALD M2550 GOODLETTE ROAD NORTH, SUITE 100NAPLES FL 34103 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Business Filings Incorporated515 E. Park Avenue, Tallahassee, Florida 32301

P.O. Box NOT acceptable

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.

John O'Connor  
Signature of an officer or director

John O'Connor, Vice-President  
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.

Mark Williams  
Signature of Registered Agent

3rd day of January, 2013  
Date

If signing on behalf of an entity:

Mark Williams, AVP  
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)

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