P09000084184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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L.A. Cherry

C.COULLIETTE

SEP 15 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AAA ABLE LANDSCAPING CORP
Name of Corporation

DOCUMENT NUMBER: P09000084184

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:

JAMES WILLIAM BAYS
Name of Contact Person

AAA ABLE LANDSCAPING CORP
Firm/Company

POST OFFICE BOX 6842
Address

JACKSONVILLE, FL 32236-6842
City/State and Zip Code

JWB.aaaable@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAMES WILLIAM BAYS at (904) 514-2438
Name of Contact Person — Area Code & Daytime Telephone Number

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

CR2E045 (8/05)

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: AAA ABLE LANDSCAPING CORP

2. The principal office address: 3110 LUCOMA DRIVE; JACKSONVILLE, FL 32254

3. The mailing address (if different): POST OFFICE BOX 6842; JACKSONVILLE, FL 32236-6842

4. Date of incorporation/qualification: 12 OCT 2009 Document number: P09000084184

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)

LEGALZOOM REGISTERED AGENT DIVISION

7083 HOLLYWOOD BLVD SUITE 180

HOLLYWOOD, CA 90028

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

JAMES WILLIAM BAYS

5315 MISSOURI AVE

P.O. Box NOT acceptable

JACKSONVILLE, FL 32254-1332

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.

James William Bays
Signature of an officer or director

JAMES WILLIAM BAYS TREASURER
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.

James William Bays
Signature of Registered Agent

10 SEPTEMBER 2010
Date

If signing on behalf of an entity:

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)