

P120000046573

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Urban Food Forest Inc  
Name of Corporation

**DOCUMENT NUMBER:** P 120000 46573

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:

Michele Holzberger  
Name of Contact Person

Urban Food Forest Inc  
Firm/Company

13219 Byrd Dr Suite B  
Address

Odessa FL 33556  
City/State and Zip Code

michele @ teamcenterline.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michele Holzberger at (813) 948-1183  
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

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

1. The name of the corporation: Urban Food Forest, Inc.
2. The principal office address: 13219 Byrd Dr, Suite B,  
Odessa FL 33556
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 5/18/2012 Document number: P12 000046573
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)  
United States Corporation Agents, Inc.  
13302 Winding Oak Court, Suite A  
Tampa FL 33612
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
Dustin Holzberger  
20320 Moss Branch Ct  
P.O. Box NOT acceptable  
Lutz FL 33558

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.

M. Holzberger  
Signature of an officer or director

Michele Holzberger  
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.*

[Signature]  
Signature of Registered Agent

11/5/2012  
Date

If signing on behalf of an entity:

Dustin Holzberger  
Typed or Printed Name

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