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| PICK-UP WAIT MAIL | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

| то: | Amendment Section Division of Corporations | |
|-----------------|---|--|
| SUBJE Name o | CT: CHANGE OF PHYSICAL ADD of Corporation | RESS FOR BUSINESS AND REGISTERED AGE |
| DOCU | MENT NUMBER: 81-2952875 | |
| The end | closed Statement of Change of Regi | stered Office/Agent and fee are submitted for filing. |
| Please 1 | return all correspondence concernin | g this matter to the following: |
| | THEODOROPOULOS of Contact Person | |
| | OUND FORCES LANDSCAPING, IN | sc. |
| | ompany | |
| 1765 RC | • | |
| Address | s | |
| COCOA | A, FL 32926 | |
| City/Sta | ate and Zip Code | Children and a second |
| | GROUNDFORCESFL(| @GMAIL.COM |
| E-mail | address: (to be used for future a | nnual report notification) |
| | | |
| For furt | her information concerning this ma | tter, please call: |
| COSTA | THEODOROPOULOS | at (321)506-0456 |
| | Name of Contact Person | at (321)506-0456 Area Code & Daytime Telephone Number |
| Enclose | ed is a \$35.00 check made payable t | |
| | Mailing Address: Amendment Section | Street Address: Amendment Section |
| | Division of Corporations | Division of Corporations |

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statenger is submitted for a corporation organized under the laws of the State of $\frac{\text{FL}}{\text{FL}}$ for the change its registered office or registered agent, or both, in the State of Flo | ORIDA |
|--|---|--|
| 1. The name of | the corporation: S.C. GROUND FORCES LANDSCAPING, INC. | |
| | office address: 1765 ROSA ST, COCOA FL 32926 | |
| 3. The mailing a | address (if different): | |
| 4. Date of incorp | poration/qualification: 05/15/2016 Document number: 81-2952875 | |
| | d street address of the current registered agent and registered office on file with urtment of State: (If resigned, enter resigned) | the |
| | SHANNON SHEPARD | |
| | | |
| | VIERA, FL 32940-6234 | |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): SHANNON SHEPARD - NEW ADDRESS FOR HER AND BUSINESS LOCA | | |
| | 1765 ROSA ST, COCOA FL 32926 | 7070 NOV 16 F |
| | P.O. Box NOT acceptable | PH 1: 52 |
| The street address changed will | ess of its registered office and the street address of the business office of its relational. | , – |
| Signatu | as authorized by resolution duly adopted by its board of directors or by an of the board, or the corporation has been notified in writing of the change. Costa Theoretical Printed or typed name and title | ficer so |
| i Jurther agree i of my dutfes, an document is bei | t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and completed I am familiar with and accept the obligation of my position as registered a ing filed merely to reflect a change in the registered office address. I hereby a speen notified in writing of this change. | ete performance gent. Or, if this confirm that the |
| | 11/09/2020 | |
| / / | enature of Registered Agent Date Chalf of an entity: Shannon Shepard | |
| | FORCES LANDSCAPING, INC. | |
| | yped or Printed Name | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)

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