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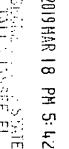
(Re	equestor's Name)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

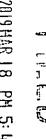




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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	JECT: Central Flunda Laun (are and landscaping Inc
DOC	CUMENT NUMBER: PITOOO	167228
The er	enclosed Statement of Change of Registered Office/Ago	ent and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the	ne following:
	Eddie Twve Name of Contact	
	Central Manda Lawn Firm/Compar	lare and Landsraping, Dig
	3220 Laury By Address	id SE
	Palm Pay, Fl City/State and Zip	329.09 o Code
	Central FL lawn (a E-mail address: (to be used for future	annual report notification)
For fu	urther information concerning this matter, please call:	
	Eddie Twes Name of Contact Person at (Area Code & Daytime Telephone Number
Enclos	sed 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

runsuant 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: Central Flurida Laur Care and Lands raping, Free
2. The principal office address: 3220 Loury Blud SE, Palm Bay, FC 22909
3. The mailing address (if different):
4. Date of incorporation/qualification: 9 9 17 Document number: P 700067 228
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)
Cardy Graham EA.
129 W. Hibiscus Blud, Ste T
Melbourne, FL 32901
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
P.O. Box NOT acceptable
486 N Harbor City Blvd P.O. Box NOT acceptable Melburne, FL 32935
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 Finded or typed pame and title
hereby accept the appointment as registered agent and agree to act in this capacity. Surther 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 sereby configure that the corporation has been notified in writing of this change. Signature of Registered Agent Date
Struck Caruso

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