

P97000039028

**ALOMA FLORIST**

7431 Aloma Ave.  
Winter Park, FL • 32792  
(Goldenrod)



City/State/Zip

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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FILED  
99 AUG -9 PM 12:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. LEWIS AUG 13 1999

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

August 2, 1999

Aloma Florist  
2050 Semoran Blvd., Suite 128  
Casselton Corners Plaza  
Winter Park, FL

SUBJECT: ALOMA FLORIST, INC.  
Ref. Number: P97000039028

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We have received your document for ALOMA FLORIST, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to file a statement of change of registered office or agent is \$35. Please return your document and check.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6901.

Susan Payne  
Senior Section Administrator

Letter Number: 699A00039123

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

Pursuant to the provisions of sections 607.0502, 617.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Aloma Florist, Inc.
2. The mailing address of the corporation is: 7431 Aloma Avenue
3. Date of Incorporation/qualification: Document number:
4. The name and address of the current registered agent and office:

Katherine Boyd  
545 S. Lake Triplett Drive  
Casselberry, Florida 32707

5. The name and address of the new registered agent and office: P.O. Box Not Acceptable)

Robert Boyd  
2050 Semoran Blvd  
Unit # 128  
Winter Park, Florida 32792

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.

Katherine Boyd  
(Signature of an officer, chairman or vice chairman of the board)

7/28/99  
(Date)

PRESIDENT  
(Printed or typed name and title)

Having been named as a registered agent and to accept service of process for the above stated corporation, 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.

By: Robert B. Boyd  
(Signature of Registered Agent)

7/28/99  
(Date)

If signing on behalf of an entity:

ROBERT B. BOYD  
(Typed or printed Name)

V.P.  
(Capacity)

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FILED  
AUG - 9 PM 12:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA