

P98000072962

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

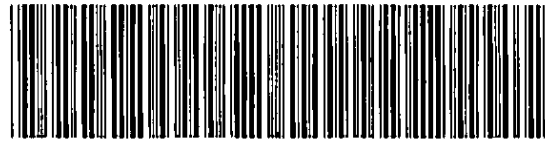
(Business Entity Name)

(Document Number)

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2018 OCT 15 AM 11:49

OCT 26 2018

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Home & Nature Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P 980000 72962

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:

Hein Karmen  
Name of Contact Person

Firm/Company

Po Box 621 772  
Address

Orlando FL 32862  
City/State and Zip Code

hkarmen@cfl.rr.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hein Karmen at (407) 924-4402  
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Home & Nature Inc.  
2. The principal office address: 14837 Honeycrisp Ln  
Orlando, FL 32827  
3. The mailing address (if different): PO Box 621772  
Orlando, FL 32862  
4. Date of incorporation/qualification: 08/19/1998 Document number: Pg8000072962  
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)

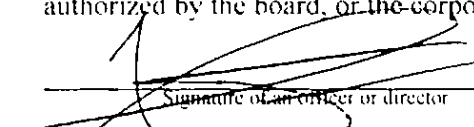
Hein Karmann  
9441 Myrtle Creek Ln  
Orlando, FL 32832

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

Hein Karmann  
14837 Honeycrisp Ln  
Orlando, FL 32827  
P.O. Box NOT acceptable

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

Hein Karmann President  
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 of Registered Agent

10/04/18  
Date

If signing on behalf of an entity:

Hein Karmann  
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

2018 OCT 15 AM 11:45