

999 000022174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

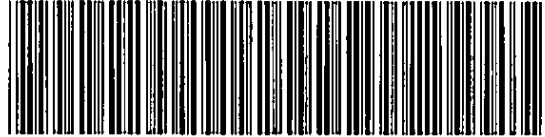
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

C. GOLDEN

OCT 19 2018

## COVER LETTER

TO: Amendment Section  
Division of Corporations

**Smith LandScape Services, Inc.**

SUBJECT: \_\_\_\_\_  
Name of Corporation

DOCUMENT NUMBER: 799000022174

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:

SHARON PALOMINO  
Name of Contact Person

Smith LandScape Services, Inc.  
Firm/Company

10700 47th Street N.  
Address

Clearwater FL 33762  
City/State and Zip Code

SPALOMINO@SMITH LANDSCAPE SERVICES.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANK K. SMITH at ( 727 ) 440-6565  
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: Smith LandScape Services, Inc.
2. The principal office address: 10700 47th STREET NORTH  
Clearwater FL 33762
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03-05-1999 Document number: P99000022174
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)

FRANK K. SMITH

1293 MYERS RD

BLOOKSVILLE FL 34602

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

FRANK K. SMITH

10700 47th STREET NORTH

P.O. Box NOT acceptable

Clearwater FL 33762

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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.

Sharon Paomino

Signature of an officer or director

SHARON PAOMINO, V.P.

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

10/15/2018

Date

If signing on behalf of an entity:

FL Smith

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