

P99000096085

MARIO G. DE MENDOZA, III, P.A.  
ATTORNEYS AT LAW  
12765 FOREST HILL BOULEVARD  
SUITE 1302  
WELLINGTON, FLORIDA 33414

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

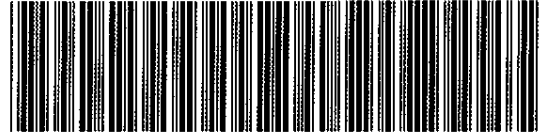
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*R.A. Charge*

G. Goulette MAR 27 2008

**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: Clintmoore Heritage Nursery, Inc.
2. The principal office address: 10716 Heritage Farm Road, Lake Worth, FL 33467
3. The mailing address (if different): c/o Mario G. de Mendoza, III, P.A., 12765 Forest Hill Boulevard, Suite 1302, Wellington, FL 33414
4. Date of incorporation/qualification: October 29, 1999 Document number: P99000096085
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Richard R. Ebersold

10716 Heritage Farm Road

Lake Worth, FL 33467

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

Mario G. de Mendoza, III, P.A.

12765 Forest Hill Boulevard, Suite 1302

(P.O. Box NOT acceptable)

Wellington, Florida 33414

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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.

(Signature of an officer or director)

Richard R. Ebersold, 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)

3-24-08  
(Date)

If signing on behalf of an entity:

Mario G. de Mendoza, III, President

(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