DOCUMENT# P09000072412			Socrata	Apr 08, 2015 Secretary of State	
Entity Name: TROPICAL OUTDOORS LANDSCAPE & MAINTENANCE, INC.				CR5275177693	
Current Prin 307 WEST MAI APOPKA, FL 3					
Current Mai	ling Address:				
P.O BOX 27 APOPKA, F	49 L 32704-2749 US				
FEI Number: 27-0973040 Certificate			Certificate of Status De	esired: Yes	
Name and A	Address of Current Registered Ag	jent:			
FLORES, JOSE 7864 BROCKW ORLANDO, FL	OOD CIRCLE				
The above name	d entity submits this statement for the purpose of a	changing its registered office or regist	tered agent, or both, in the State of	Florida.	
SIGNATURE: JOSEPH FLORES				04/08/2015	
	Electronic Signature of Registered Agen	t		Date	
Officer/Dire	ctor Detail :				
Title	PRES	Title	VP		
Name	CALIFAR, LARRY EIII	Name	FLORES, JOSEPH RALPH		
Address	6590 BRENDA DRIVE	Address	1519 LK MARION DR		
City-State-Zip:	APOPKA FL 32703	City-State-Zip:	APOPKA FL 32712		

2015 FLORIDA PROFIT CORPORATION REINSTATEMENT

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH FLORES

Electronic Signature of Signing Officer/Director Detail

04/08/2015 Date

FILED