## F00000001301

## NURSERY SUPPLIES INC.

"HELPING YOU GROW YOUR BUSINESS" 2050 Avenue A • Kissimmee, FL 34758

Older 13 Millione

Office Use Only

**Examiner's Initials** 

ORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
(Corporation Name)	200004724552 -12/13/0101046007 *****35.00 ******35.0
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
Walk in Pick up time	Certified Copy
Mail out Will wait	Photocopy Certificate of Status
EW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
THER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other  V SHEPARD DEC 1920

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

Pursuant to th	ne provisions of sections 60	7.0502, 617.0502, 603	7.1508, or 617.1508, Florida Sidii 	ales,
the undersigne	ed corporation organized un	ger ine saws of the Sia In change its registeres	i office or registered agent, or both	h, în
the State of Fil	orida .			
1. The name o	of the corporation is: NULS	<del>kry Supplies d</del>	7£.	
	_	<i>G</i>		
2. The mailing	address of the corporation	is: <u>addo averiu</u>	e a	
_	<u>hiss</u>	unnee FL 34	758	
3. Date of inc	corporation/qualification:	3.9.20001	Document number: FOO 0000	0130
4. The name a	and address of the current rep	gistered agent and offic	œ;	9
	Perry Broadhead	ls	<u>-                                    </u>	DINIO DEC 13
	1985 avenue a.			E.
	hissimmed Fl.	34758		دن
5. The name a	and address of the new regis	tered agent and office:	(P. O. Box Not Acceptable)	3
	Candice Morwood			
	ADSO avenue a	•		
	Hissimmee, FL	34158		
agent, as chai	dress of its registered office	and the street address	of the business office of its regist	
Such change authorized by	was authorized by resolution	on duly adopted by its	board of directors or by an officer	₽O
	IL POLON C	Fo	12/4/01	_
(S) (c)	up of an officer chairman or vice ch	arringn of the board)	(Date)	
JEGG	REY W. JOHES  (Printed or typed name and	CFO		
	(Printed or typed name and	itile)	of process for the above stated	
Having Deen corporation, i jurther agre performance	named as registered agent I hereby accept the appoin se to comply with the provid of my duties, and I am fam	iment as registered ag sions of all statutes rel iliar with and accept t	of process for the above stated ent and agree to act in this capaci ative to the proper and complete he obligation of my position as	ty.
registered as	gent.	1	12/5/01	
<u> </u>	(Signature of Registered Agent)	<u> </u>	(Date)	-
If signing on be	ehalf of an entity:			
	(Typed or Printed Name)		(Capacity)	-
	***	FILING FEE: \$35.00	<b>非</b> 鄉	
CR2E045(7/97)		E 77 Brow 40 17	Tailahassee fl. 32314	
	DIVISION OF CORPORATIONS	P.C. BOX 6527	* Articulation and Applica	