P08000060640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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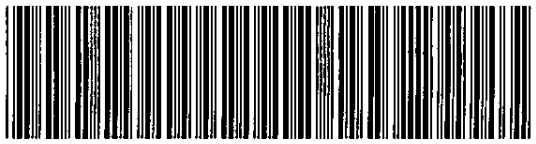

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 NOV -2 PM 1:38

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 20, 2009

CHRISTOPHER R. GENTRY
GENTRY POOL SERVICES, INC.
920 S. KENTUCKY AVE
WINTER PARK, FL 32789

SUBJECT: GENTRY POOL SERVICES, INC.
Ref. Number: P08000060640

We have received your document for GENTRY POOL SERVICES, INC. and your check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 109A00033396

2009 NOV -2 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GENTRY POOL SERVICES, INC.
Name of Corporation

DOCUMENT NUMBER: P08000060640

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:

CHRISTOPHER R. GENTRY
Name of Contact Person

GENTRY POOL SERVICES, INC.
Firm/Company

920 S. KENTUCKY AVE.
Address

WINTER PARK, FL 32789
City/State and Zip Code

POOLGUARDORLANDO@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHRIS GENTRY at (407) 599-7665
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

CR2E045 (8/05)

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: GENTRY POOL SERVICES, INC.

2. The principal office address: 920 S. KENTUCKY AVE., WINTER PARK, FL 32789

3. The mailing address (if different):

4. Date of incorporation/qualification: 06/23/2008 Document number: P08000060640

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)

Christopher R. Gentry
3800 SURREY DR.
ORLANDO, FL 32812

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TALLAHASSEE FLORIDA

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

CHRISTOPHER R. GENTRY
920 S. KENTUCKY AVE
P.O. Box NOT acceptable
WINTER PARK, FL 32789

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 — Christopher R. Gentry, 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 — 09/29/2009
Date

If signing on behalf of an entity:

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

CR2E045 (8/05)