## B0200000185

•
(Requestor's Name)
(Address)
(Address)
. (Address)
(City/State/Zip/Phone #)
•
PICK-UP WAIT MAIL
PICK-OP WAII WIAIL
· (Business Entity Name)
(Business Entity Name)
•
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
•
·

Office Use Only

G. MCLEOD

JUN 2 4 2008

**EXAMINER** 



500131344295

06/23/08--01035--010 \*\*35.00

08 JUN 23 PM 4: 00

BIVISION OF CORPORATION BIVISION OF CORPORATION



June 20, 2008

Division of Corporations Florida Department of State Clifton Building P.O. Box 6327 Tallahassee, FL 32314

RE: Pump Plus Rental, Ltd..

Dear Filing Officer:

Please file the attached change of agent form for the referenced company. Enclosed please find a check for the requisite fees. Please return evidence of filing to my attention via regular mail.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (800) 862-5438. Thank you very much for your assistance.

Very truly yours, Donisa Bell

Denise Bell

Senior Customer Specialist

Encl.

## **COVER LETTER**

TO: Registration Section

Division of Corporations

SUBJECT: Pump Plus Rental, Ltd.

(Name of Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: B0200000185

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Denise Bell

(Contact Person)

National Corporate Services, LLC

(Firm/Company)

16055 Space Center Blvd., Ste. 235

(Address)

Houston, TX 77062

(City, State and Zip Code)

For further information concerning this matter, please call:

Denise Bell

..... 800

862-5438

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Florida Department of State.

## STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

INHS04 (01/06)

**MAILING ADDRESS:** 

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Pump Plus	s Rental, Ltd.			
Nar	ne of Limited Partnership or L	imited Liability Limited Partne	rship	
<sub>2.</sub> 05/29/2002		<sub>3.</sub> B020000	<sub>3.</sub> B0200000185	
Date of filing/registration in Florida		Florida doc	Florida document number	
4. The name of the rep Department of State:	gistered agent and the registere	ed office address as shown on th	ne records of the Florida	
	<b>CT</b> Corporation	System		
·	N	ame	_	
	1200 South Pin	e Island Road		
	Ad	ldress	<del>-</del>	
	Plantation, FL	33324	_	
	City, Sta	ate and Zip	v-40) y	
5. The name and Flori	da street address of the new re	gistered agent and/or office:		
	NRAI Services, Inc.			
•	N	ame	_	
	2731 Executive Park [	Orive, Suite 4		
•	Florida street address (	P.O. Box not acceptable)	_	
	Weston	FL 33331	,	
•	City, Sta	ate and Zip	<del></del>	
6. Such change(s) is/a	re effective when filed by the	Florida Department of State.		
	$\checkmark$			
Signature of General P	artner Daisy Suit, Ex	_ kecutive V.P., RIFES]	, L.L.C.	
comply with the provis and I am familiar with NRA! Services Ir by:	ions of all statutes relative to to an accept the obligations of m C Bell 1 Agent	and agree to act in this capacity the proper and complete perfort sy position as registered agent. -	v. I further agree to mance of my duties,	
Denise R	Bell, Host, Sery.			

\$35.00

Filing Fee:

Certified Copy (optional): \$52.50