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Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : C T CORPORATION SYSTEM
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TALLAHASSEE, FLORIDA

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: _____

**REGISTERED AGENT CHANGE
PENTAIR WATER GROUP, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

[Handwritten signature and initials]
7/30/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PENTAIR WATER GROUP, INC.
Name of Corporation

DOCUMENT NUMBER: F06000002397

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:

Karla Stockman
Name of Contact Person

Pentair Inc.
Firm/Company

5500 Wayzata Blvd., Suite 800
Address

Golden Valley, MN 55416-1259
City/State and Zip Code

karla.stockman@pentair.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karla Stockman at (763) 545-1730
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

CR2ED45 (6/05)

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 Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: PENTAIR WATER GROUP, INC.
2. The principal office address: 5500 WAYZATA BLVD., STE 800, GOLDEN VALLEY, MN 55416-1261
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/14/2006 Document number: P06000002397
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)

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR. #4
WESTON, FL 33331 US

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

C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
Plantation, Florida 33324
P.O. Box NOT acceptable

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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.

Sharlin Aldao Signature of an officer or director
Sharlin Aldao, Vice 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.

By: Rebecca Barth Signature of Registered Agent
Assistant Secretary Date: 7/29/2010
Rebecca Barth

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
CR2B045 (R/05)