

F08000002210

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN 22 PM 12:21

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R.A.

TB

6/23/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Genesis Fluid Solutions
Name of Corporation

DOCUMENT NUMBER: CR2E045

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:

Brittany Jorgenson
Name of Contact Person

Genesis Fluid Solutions
Firm/Company

6660 Delmonico Dr. Suite 242-D
Address

Colorado Springs, CO 80919
City/State and Zip Code

bjorgenson@genesissfluidsolutions.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brittany Jorgenson at (719) 210-6646
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

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

1. The name of the corporation: Genesis Fluid Solutions, Ltd, Corp.
2. The principal office address: 830 Tender Foot Hill Road #301
Colorado Springs, CO 80906
3. The mailing address (if different): 6660 Delmonico Dr. Suite 242-D
Colorado Springs, CO 80919
4. Date of incorporation/qualification: 5/15/2008 Document number: F08000002210
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)

Benjamin Hodges

15855 Miami Lakeway North #E354

Miami Lakes, FL 33014

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

Paul Vette

3135 NW 79th Ave Rd

P.O. Box NOT acceptable

Ocala, FL 34482

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TALLAHASSEE, FLORIDA

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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.


Signature of an officer or director

DANIEL LOHMEYER - SECRETARY
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

6-16-09
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)