## F09000000402

(Re	questor's Name)					
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DA)	dress)	•				
(City/State/Zip/Phone #)						
PICK-UP	WAIT	MAIL				
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Certified Copies	Certificates	s of Status				
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Special instructions to	Filing Officer:					





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SECRETARY OF STATE
TALLAHASSEE, FLORID.

C.COULLIETTE
FEB 1 1 2009

## **COVER LETTER**

TO: Amendment Section Division of Corporations						
SUBJECT: Septic Preservation Services, Inc. (Name of Corporation)						
DOCUMENT NUMBER: F09000000402						
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:						
Stephen A. O'Connor						
(Name of Contact Person)						
Septic Preservation Services, Inc. (Firm/Company)						
PO Box 1604 (Address)						
Bradenton, Florida 34206						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
Stephen A. O'Connor at (800) 606 9876 (Name of Contact Person) (Area Code & Daytime Telephone Num)	oer)					
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

	-	-		607.1508, or 617.1508, Florida		iis	
•	_			ed under the laws of the State of		<del></del>	_
in orde	er to change	its registered (	office or registere	d agent, or both, in the State of I	√lorida.		
1. The name of	the corporat	ion: <u>Septic I</u>	Preservations	Services. Inc.	<u>.</u>	<del></del>	
2. The principal	office addre	ess: 25 Plaz	a Drive, Suite	10	<del></del> -		
Scarborou	<u>igh, Main</u>	04074	<u>-</u> <u>-</u>	<del> </del>			
3. The mailing a	address (if d	ifferent): PO	Box 2217		·····		
South P	ortland, M	aine 04116	-2217			<del></del>	····
4. Date of incor	poration/qua	lification: Ja	nuary 29, 200	9 Document number: F0900	0000402	) !	
			ent registered age d, enter resigned)	nt and registered office on file w	ith the		
	Stephen	A. O'Conno	or		<del></del>		
	RPM #E	50, 1005 Ri	verside Drive		<del></del>		
	Palmetto	, Florida 34	221		- <b>Z</b>		
6. The name and (if changed):	d street addr	ess of the new	registered agent (	if changed) and /or registered of	ECRETA	09 FEB -	المستوالية
	Ms. Jani	ce Null, c/o	InCorp Service	es, Inc.	RY ( SSEE		CENTERED
	17888 6	7th Court N			- 프	=	Seatter 5
			iox NOT acceptable)		OR OR	<u></u>	
	Loxahat	chee, Florid	a 33470			+	
The street address changed will	ess of its reg I be identica	gistered office 1.	and the street ad	dress of the business office of i	ts register	ed age	nt,
Such change wanthorized by the	as authorize he board, oi	d by resolution the corporation	on duly adopted bon has been notif	y its board of directors or by ar ied in writing of the change.	officer so	)	
Styl (Signat	Q C	or director)		Stephen A. O'Connor (Printed or typed name and	Preside	ent	_
corporation na.	s veen noug	ieu in writing	oj inis change.	agree to act in this capacity. es relative to the proper and con ation of my position as registere registered office address, I here	mplete per ed agent. by confirm	formai Or, if t 1 thát t	nce his he
Stole	~ a	stered Agent)		February 4, 20	009		
(Si	gnature of Regi	stered Agent)		(Date)			<del></del>
If signing on be	ehalf of an e	entity:	•				
	Typed or Printer	l Name)	··· <del>······</del>				
		**	* FILING FEE	: \$35.00 * * *			