

# F1600000 3325

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

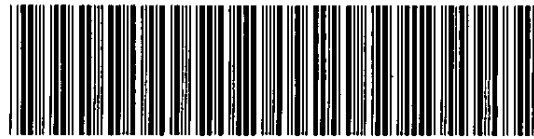
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700297232057

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2017 MAR 27 AM 12:00

RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2017 MAR 27 PM 4:07

V HERRING  
MAR 28 2017

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 571887 8039623

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : March 27, 2017

ORDER TIME : 3:43 PM

ORDER NO. : 571887-005

CUSTOMER NO: 8039623

CHANGE OF AGENT

NAME: MODULAR WETLAND SYSTEMS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender

EXAMINER'S INITIALS: \_\_\_\_\_

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

1. The name of the corporation: Modular Wetland Systems, Inc.
2. The principal office address: 511 E. John Carpenter Freeway, Suite 600, Irving, TX 75062
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 07/25/2016 Document number: F16000003325
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)

C T Corporation System

1200 South Pine Island Road

Plantation

FL 33324

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

Corporation Service Company

1201 Hays Street

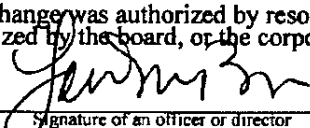
P.O. Box NOT acceptable

Tallahassee

FL 32301

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

Lori M. Browne, SVP, Secretary & Gen. Counsel  
\_\_\_\_\_  
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.*

Corporation Service Company

By: 

\_\_\_\_\_  
Signature of Registered Agent

3/27/17  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Melissa Zender

Asst. Vice President

\*\*\* 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 (03/12)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2017 MAR 27 AM 12:00