



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

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000030023
Phone : (614) 280-3336
Fax Number : (954) 208-0845

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

Email Address: _____

RECEIVED

2018 NOV 15 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FL

REGISTERED AGENT CHANGE
WATERCO OF THE MIDWEST, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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S. YOUNG

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

1. The name of the corporation: WaterCooftheMidwest, Inc.
2. The principal office address: 307 E 15TH ST, STE. B PANAMA CITY, FL 32405
3. The mailing address (if different): 20 S HIGHLAND AVE, #113 LOMBARD, IL 60148
4. Date of incorporation/qualification: 08/22/2017 Document number: F17000003810
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)

CAPONE, JOHN

307 E 15TH ST, STE. B

PANAMA CITY, FL 32405

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

CT Corporation System

1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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.

P Belanger
Signature of an officer or director

Tricia Belanger, 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.

By: CT Corporation System
Michele Holden
Signature of Registered Agent

11/15/2018

Date

If signing on behalf of an entity:

Michele Holden, Asst Sect

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

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