

F9600003063

(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



200287092592

06/24/16--01012--011 **35.00

2016 JUN 24 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

JUN 30 2016
C. CARROTHERS

June 16, 2016

VIA US MAIL

Florida Department of State
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: **Roberts Water Technologies, Inc.**

Dear Sir or Madam:

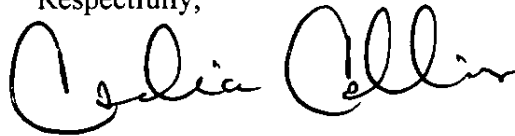
On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
2. **\$35.00 CORP \$ 25.00 LLC** to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (888) 705-7274.

Respectfully,

A handwritten signature in black ink, appearing to read "Candice Callins". The signature is fluid and cursive, with the first name "Candice" and last name "Callins" clearly distinguishable.

Candice Callins
REGISTERED AGENT SOLUTIONS, INC.
1701 Directors Blvd., Suite 300
Austin, TX 78744

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ROBERTS WATER TECHNOLOGIES, INC.
Name of Corporation

DOCUMENT NUMBER: F96000003063

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:

Candice Callins

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd., Suite 300

Address

Austin, TX 78744

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Candice Callins

Name of Contact Person

at (888) 705-7274

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

1. The name of the corporation: ROBERTS WATER TECHNOLOGIES, INC.
2. The principal office address: 214 N. JACKSON STREET MEDIA, PA 19063

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06/18/1996 Document number: F96000003063

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):

Registered Agent Solutions, Inc.

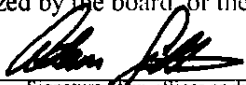
155 Office Plaza Dr. Suite A

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.

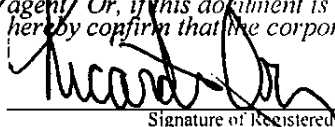


Signature of an officer or director

Adam Saldana, Attorney in Fact for R. Lee Roberts,
CEO of Roberts Water Technologies, Inc.

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

6/9/2016

Date

If signing on behalf of an entity:

Ricardo Orozco, Secretary

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 (03/12)

2016 JUN 24 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FL 32304

FILED

SPECIAL LIMITED POWER OF ATTORNEY

I, R. Lee Roberts, the duly authorized C.E.O of Roberts Filter (Company), a corp. formed under the laws of Pennsylvania, does hereby make, constitute, and appoint Registered Agent Solutions, Inc., and each duly authorized representative of such entity, including without limitations Jaclyn Wright, Purity Mbogo, and/or Adam Saldaña, as my true and lawful attorney-in-fact with full right, power and authority for me, as an authorized officer/director or manager/member of the aforementioned Company and any subsidiaries as shown on the list appended hereto, if applicable, to act for the Company and any subsidiaries and in the name of the Company and any subsidiaries in order to effectuate a change in their registered agent, registered office, and/or the agent and office of similar import in any jurisdiction.

In the execution of any documents required for the limited purposes set forth above, Jaclyn Wright shall exercise the power of Vice President and Purity Mbogo or Adam Saldaña shall exercise the power of Secretary. In the case of the Company and any subsidiaries having managers or other positions of authority, the named individuals shall act in such office and with such authority as is required to effect the changes set forth above.

This Special Limited Power of Attorney shall be effective as of the date set forth below and shall continue in effect for six months from the effective date. The Company may revoke this Special Limited Power of Attorney at any time by notice to Jaclyn Wright, Purity Mbogo, and/or Adam Saldaña.

IN WITNESS WHEREOF, I, _____ have set my hand this _____ day of _____, 2016

Signature

Name: R. Lee Roberts

Title: C.E.O.

State of PA
County of Delaware

On June 3, 2016 before me, the undersigned, a Notary Public in and for said State, personally appeared R. Lee Roberts, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he or she executed the same in his or her authorized capacity, and that by his or her signature on the instrument the person, or the entity upon behalf of which the person acted, executed this instrument.

Witness my hand and official seal.

Shirley A Bruner
Signature

Notary Public: Commission Expires August 11, 2016

