REFER			0032		
	ENCE :	376508	125732	A	•••••••
AUTHORIZA	TION :				
COST L	IMIT :	\$ PPD			
ORDER DATE : September 15	 5. 1999		· 	<u>-</u>	
ORDER TIME : 11:20 AM			K	han	00
ORDER NO. : 376508-005					Sr.
CUSTOMER NO: 125732A			4000 -(02989 9/16/99 ****35.00	9034-
CUSTOMER: Ms. Ruth Cuthbe Lyon Kirwin, P. Suite 150 338 W. Morse Bo Winter Park, FI	a. Dulevard		*	***J5.U] *****3
CHANGE	OF AGENT	·			·
NAME: QUALITY P PLEASE RETURN THE FOLLOWING				Chiel Aikt of STATE	

MART 99

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PECEIVED 99 SEP 16 PM 1:03 DEPARIMENT OF STATE INISION OF CORPORATIONS TAIL AHASSEF FLORED

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, the undersigned corporation organized under the laws of the State of ______ Delaware submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Quality Pump Systems, Inc.

2. The mailing address of the corporation is: <u>1010 CR 731</u>

 Venus, Florida 33960

 3. Date of incorporation/qualification:
 06/07/89⁻⁷

 Document number:
 F99000002896

4. The name and address of the current registered agent and office:

e Ì

Anne L. Bingler 390 North Orange Avenue, Ste. 2180 Orlando, FL 32801 5. The name and address of the new registered agent and office: (P. O. Box Not Arcceptable) Corporation Service Company 1201 Hays Street 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 shargs was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

(Signature of an officer, chairman or vice chairman of the board) (Date)	
	10 T L L L L
Ed Comeaux, Chief Operating Officer	·
(Printed or typed name and title)	

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Laura R. Dut	9-15-99				
(Signature of Registered Agerit) Laura R. Dunlap If signing on behalf of an entity: as its agent	(Date)				
	Asst. Secretary				
(Typed or Printed Name)	(Capacity)				
* * * FILING FEE: \$35.00 * * *					

DIVISION OF CORPORATIONS

CR2E045(7/97)

P.O. Box 6327

TALLAHASSEE, FL 32314