

# H36229

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

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

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

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

☐ PICK-UP

☐ WAIT

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

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

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DIVISION OF CORPORATIONS  
16 MAY 23 4:19:05

MAY 24 2016  
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Solvent Recovery Systems, Inc.

Name of Corporation

**DOCUMENT NUMBER:** H36229

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:

Shaun Harris

Name of Contact Person

Solvent Recovery Systems, Inc.

Firm/Company

391-B Corporate Way

Address

Orange Park, FL 32073

City/State and Zip Code

acetonerecyclers@yahoo.com

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

For further information concerning this matter, please call:

Shaun Harris

Name of Contact Person

at ( 904 ) 264-3651

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

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DIVISION OF CORPORATIONS  
16 MAY 23 PM 9:05

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

1. The name of the corporation: Solvent Recovery Systems, Inc.
2. The principal office address: 391-B Corporate Way, Orange Park, FL 32073
3. The mailing address (if different): P.O. Box 184, Orange Park, FL 32067
4. Date of incorporation/qualification: 12/29/84 Document number: H36229
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)

Shaun Harris

115-B Industrial Loop N

Orange Park, FL 32073

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

Shaun Harris

391-B Corporate Way

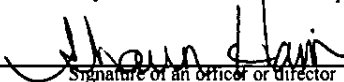
P.O. Box NOT acceptable

Orange Park, FL 32073

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DIVISION OF CORPORATIONS  
16 MAY 23 AM 9:15

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

Shaun Harris, President

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

5/19/16  
Date

If signing on behalf of an entity:

Shaun Harris

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)