

W02000031230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

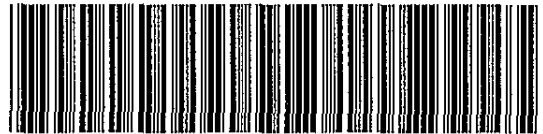
(Business Entity Name)

(Document Number)

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W02-31230
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U.S. AIR FILTRATION SYSTEMS, LLC
1737 Overview Drive
New Port Richey, FL 34655
Phone 727-375-7471
Fax 727-372-7927

September 12, 2003

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Change of Address

Dear Sir or Madam:

Please be advised of the following change of address regarding U.S. Air Filtration Systems, LLC:

Old address (mailing): P.O. Box 263186
Tampa, FL 33685

Old address (physical): 12139 Bishopsford Dr.
Tampa, FL 33626

NEW ADDRESS 1737 Overview Drive
(physical and mailing) New Port Richey, FL 34655
phone 727-375-7471
fax 727-372-7927

Enclosed you will find a change of address (including fee) regarding our registered agent.

Thank you in advance for your anticipated cooperation.

Sincerely,



Karen K. Allegrati
Owner

09/12/03 11:05 AM
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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company 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 limited liability company is: U.S. Air Filtration Systems LLC
2. The mailing address of the limited liability company is : _____
1737 Overview Drive, New Port Richey, FL 34655
11/1/02
3. Date of filing/registration in Florida _____ 4. Document number _____

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Jeffrey G. Allegrati
Name
12139 Bishopsford Dr.
Address
Tampa FL 33626
City, State and Zip

6. The name and address of the new registered agent and/or office:

Jeffrey G. Allegrati
Name
1737 Overview Drive
Florida street address (P.O. Box NOT acceptable)
New Port Richey FL 34655
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Karen K. Allegrati
(Signature of a member or authorized representative of a member)

Karen K. Allegrati
(Printed or typed name of signer)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Jeffrey G. Allegrati
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314