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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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A. LUNT	
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SECRETARY OF STATE

109 SEP -3 PH 3: 42

FILED

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Anchor Water Care Supply and Service, LLC. Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this r	natter to the following:	
William R Hudgins		
Name of Person	SECF ALL/	
Anchor Water Care Supply and Service, Firm/Company	LLC. LLC.	
1125 SW 27th Ave.	2009 SEP -3 PM 3: 42 SECRETARY OF STATE TALLAHASSEE, FLORID	
Boynton Beach FL, 33426 City/State and Zip Code		
billyhud21@hotmail.com E-mail address: (to be used for future annual report notificat	tion)	
For further information concerning this matter, pla	ease call:	
William R Hudgins at (571) 264-2666 Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

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. Name of the limited liability company: Anchor Water Care Supply and Service, LLC. 1125 SW 27th Ave. 2. (a) Principal office address of limited liability company: **√** (Note: MUST BE STREET ADDRESS) Boynton Beach FL 33426 1125 SW 27th Ave. (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Boynton Beach FL 33426 Sept 1, 2009 Document number 3. Date of filing/registration in Florida 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of William R Hudgins Registered Agent: 700 East Boynton Beach Blvd Registered Office Address: Boynton Beach FL 33435 (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**: **NEW** Registered Agent: Same 1125 SW 27th Ave. **NEW** Registered Office Address: Boynton Beach (MUST BE FLORIDA STREET ADDRESS) FL33426 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. Signature of a member or authorized representative of a member William R Hudgins Printed or typed name of signee 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 auties, 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.

> Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25,00

Signature of Registered Agent