

Oct-16-09

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FROM THE WILLIAMS LAW FIRM, P.A.

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Florida Department of State

Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Division of Corporations
Fax Number : (850) 617-6383

om:

Account Name : AGENTS AND CORPORATIONS, INC
Account Number : I20010000112
Phone : (302) 575-0875
Fax Number : (302) 575-0925

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 OCT 16 AM 8:28

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REGISTERED AGENT CHANGE

GAS AND WATER LLC

Certificate of Status	0
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EXAMINER

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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. Name of the limited liability company: GAS AND WATER LLC

2. (a) Principal office address of limited liability company: URB. EL CONDADO

☐ (Note: **MUST BE STREET ADDRESS**) CALLE M # 506
QUITO - ECUADOR

(b) Mailing address of limited liability company: WILSON WILCHES

☐ (Note: **MAY BE POST OFFICE BOX**) P.O. BOX 02-5268 MIAMI
CLUB BUZZON QUITO-3779

7/30/2009 L09000073434
3. Date of filing/registration in Florida 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: WILSON R. WILCHES

Registered Office Address: 1250 E. HALLANDALE BEACH BLVD
SUITE 600 B
HALLANDALE BEACH, FL 33009

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: AGENTS AND CORPORATIONS, INC.

NEW Registered Office Address: 300 FIFTH AVENUE SOUTH
(MUST BE FLORIDA STREET ADDRESS) SUITE 101-330
NAPLES FL 34102

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

WILSON WILCHES
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 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.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

INHS18 (03/08)