## L12000055998

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(Address)				
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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 605.0114 or 605.0116, 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.

L Na	ame of the limited liability company:GREAT	SOUT	HER	N PUMP COMPANY, LLC
2. (a)		(b)	)	
,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	No Change	_	No Ch	ange
	April 25, 2012			L12000055998
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	CT Corporation System			
·· (··)	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of St	tate.
	1200 South Pine Island Road			190 <b>23</b>
	Registered Office Address (MUST BE FLORIDA STREET	"ADDRESS)		FILED 2023 OCT 27 AM 9: 59 SECRETARY OF STATE
	Plantation F	133324		7 AH 9:1
(b)	COGENCY GLOBAL INC.			9. <b>59</b>
	Enter name of NEW Registered Agent and/or NEW Registere	d Office add	ress:	· · · · · · · · · · · · · · · · · ·
	115 North Calhoun St., Suite 4			
	NEW Registered Office Address:			
	Tallahassee	<sub>l.</sub> 32301		<del></del>
the cha agent v was/wa	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of th	tws of the ! of the regist liability cot of the limi	tered offi npany, it ted liabil	ice and the business office of the registere t is hereby confirmed that the change(s) lity company or as otherwise provided in
/s/ Th	homas G. Ruthman	Thor	nas G. F	Ruthman
Signa	ture of a member or authorized representative of a member	<del></del>		Printed or typed name of signee
provisi the obl to mere notified	by accept the appointment as registered agent and agions of all statutes relative to the proper and completing attentions of my position as registered agent as providely reflect a change in the registered office address, if in writing of this change.	gree to act e performa ed for in C I hereby co	in this ca nce of ny hapter 60 nfirm tha	ipacity. I further agree to comply with the vy duties, and I am familiar with and accep 05, F.S. Or, if this document is being filed ut the limited liability company has been
/s/ Se	ean Honan			

Sean Honan, Assistant Secretary

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

INHS18 (2/14)

Signature of Registered Agent