Florfida Department of State Division of Corporations Ricetronic Effing Cover the E

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Division of Corporations

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC REGISTERED AGENT CHANGE CONSOLIDATED WATER ENTERPRISES LLC

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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 of registered agent, or both, in the State of Florida.

١.	Na	ne of the limited liability company: CONSOLIDATEI	O WATER ENTERP	RISES LLC
2. (a) ₋	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.		11/19/2013 Date of filing/registration in Florida	L13000161	Document number
5. (a)	(a)	BAUER, WILLIAM		ZI HA
		Registered Agent and Registered Office shown on the records of t	the Florida Dept. of Sta	E II. 2021 HAY -IV SECRETARY
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 44 SE IST AVE STE 306		N PH 4:49
		OCALA , FL	34471	TATE FIL
(b)	C.T. Comporation System			
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
		NAME OF THE OWN AND ADDRESS OF THE OWN AND ADDRESS OF THE OWN ADDRESS		_
		NEW Registered Office Address: 1200 South Pine Island Road		
				_
		Plantation	33324	
the ago	cha ant v Sive	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lieve authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	rine registered offi ability company, it of the limited liabil limited liability co	is hereby confirmed that the change(s) ity company or as otherwise provided in impany. **EXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
pro the	ovis. : ob: mur tifie	ture of a member or authorized representative of a member by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete ligations of my position as registered agent as provide elverified a change in the registered office address, I d in writing of this change. C T Corporation System Chloe A	. Derformance a) m	(15, F.S. Or, if this document is heing filed in the limited liability company has been