R	equestor's Name					
	TTLE AGENCY, INC. 15 SUNSET DRIVE SUITE 200 MI, FLORIDA 33173		900002 -04/08 ***** Office Use Only	3/93-01 35.00	9 <b>59</b> 039015 *****35.0	
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of  $\underline{F(ORIDA}$  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 corporation is: Economical Septic Tonks Inc.

- 3 Date of incorporation/qualification:  $3|\partial_1|90$  Document number: 15903
- 4. The name and address of the current registered agent and office:

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Signature of an officer, chairman or vice chairman of the board) (Date) Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 obligation of my position as registered agent.

(Signature of Registered

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

## \* \* \* FILING FEE: \$35.00 \* \* \*

CR2E045(7/97)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314

PAGE 7/1

89