M02000000/33

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
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Certified Copies Certificates of Statu	s	
Special Instructions to Filing Officer:		
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Office Use Only



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JAN 1 5 2013 T. HAMPTON



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Evelyn Wright

Date: January 9, 2014

Order#: 946752-083

Re: SUPERIOR POOL PRODUCTS LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Evelyn Wright

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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: SUPERIOR POOR	L PRODUCTS LLC
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	Dany: 109 Northpark Boulevard Covington, LA 70433
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	109 Northpark Boulevard
	Covington, LA 70433
01/15/2002	M02000000133
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:	C T Corporation System
Registered Office Address:	1200 S. Pine Island Road
	Plantation, FL 33324
(b) Enter name of NEW Registered Agent and/or	NEW Registered Office address:
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
MOST BE TEORIDA STREET ADDRESS	Tallahassee ,F
If the limited liability company is not organized under confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company as of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company are changed by the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited liability company as other than the change of the limited l	ne Florida street address of the registered office dentical. Or, in the case of a Florida limited ge(s) was/were authorized by an affirmative vote of erwise provided in the articles of organization of
Signature of a member or authorized representative of a member	
Dona Priebe, Authorized Person Printed or typed name of signee	2: 00
I hereby accept the appointment as registered agent a comply with the provisions of all statules relative to the and I am familiar with and accept the obligations of me Chapter 605, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability compaints accept the obligations of me Chapter 605, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability compaints of Registered Agent Sylvia Queppet, Assistant Vice Provided the Chapter Agent Sylvia Queppet, Assistant Vice Provided the Chapter Agent Agent Sylvia Queppet, Assistant Vice Provided the Chapter Agent Agent Agent Agent Sylvia Queppet, Assistant Vice Provided the Chapter Agent	

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