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COVER LETTER

TO: Registration Section . Division of Corporations	·*					
Watershed Geosynthetics LLC						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Cl	nange and fee(s) are submitted for filing.					
Please return all correspondence concerning this mat	tter to the following:					
Henry Day						
Name of Person						
M. Henry Day, Jr., P.C.						
Firm/Company						
3960 Falls Ridge Drive						
Address						
Johns Creek, Georgia 30022						
City/State and Zip Code						
henrydaylaw@gmail.com						
E-mail address: (to be used for future annual re	•					
For further information concerning this matter, plea-	se call:					
Henry Day	678 427-0394					
Name of Person	Area Code & Daytime Telephone Number					
Mailing Address:	Street Address:					
Registration Section	Registration Section					
Division of Corporations	Division of Corporations					
P.O. Box 6327	The Centre of Tallahassee					
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Enclosed is a check for the following amo	ount:					
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					

INHS18 (2/14)

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.

. (a)	Suite 200	a.	Suite 200	
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	:: (¢	Mailing a	ddress of limited liability company: MAY BE POST OFFICE BOX)
	11400 Atlantis Pleae		i 1400 Atlantis Plac	
	Alpharetta, GA 30022		Alpharetta, GA 300	022
	May 12, 2015		M15000004009	
(a)	Date of filing/registration in Florida Chuck R. Ayers	4.	Docum	ent number
(4)	Registered Agent and Registered Office shown on the record \$106 Seven Mile Drive	is of the Florida	Dept. of State:	2021 DEC 20 SECRLIAR TALLAHA
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS	!	20 N
	Ponte Vedra	. FL 32082		M 6: 54
(b)	Michael R. Ayers	· · · · · · · · · · · · · · · · · · ·		· m
	Enter name of <u>NEW Registered Agent</u> and or <u>NEW Registered</u> 129 Flip Flop Lane	ered Office add	<u>ress</u> :	
	NEW Registered Office Address:			
	Inlet Beach	FL_32461		
inge ent w s/wei artic	mited liability company is not organized under the or changes are made, the Florida street address of till be identical. Or, in the ease of a Florida limited re authorized by an affirmative vote of the membereles of organization or the operating agreement of the second control of the control of the operating agreement of the operating agreemen	the registered Hiability con is of the limit	office and the bus ipany, it is hereby o ed liability compar	iness office of the registered
M .	ten of a member or antiformed representative of a member	M. He	nry Day, Jr., Attorne	
			Daring and all	typed name of signee

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