

P00000024616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

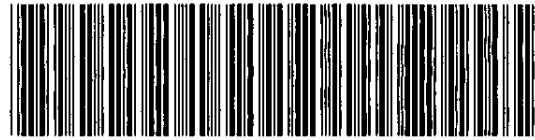
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 DEC - 8 AM 10:41

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DEC
12/10



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2008

PRO CLEAR AQUATIC SYSTEMS, INC.
2959 MERCURY RD
JACKSONVILLE, FL 32207

SUBJECT: PRO CLEAR AQUATIC SYSTEMS, INC.
Ref. Number: P00000024616

We have received your document for PRO CLEAR AQUATIC SYSTEMS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE REGISTERED AGENT'S SIGNATURE MUST BE ORIGINAL. THE CURRENT AGENT IN #5 DOES NOT MATCH OUR RECORDS. PLEASE CORRECT. SEE ATTACHED PRINT OUT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 608A00053859



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2008

PRO CLEAR AQUATIC SYSTEMS, INC.
2959 MERCURY RD
JACKSONVILLE, FL 32207

SUBJECT: PRO CLEAR AQUATIC SYSTEMS, INC.
Ref. Number: P00000024616

Our records indicate the registered agent for the above named corporation resigned on August 7, 2008 and that the corporation currently does not have a registered agent designated.

Chapter 607/617, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a corporation for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named corporation 60 days from the date of this letter if a registered agent is not properly designated.

Please designate a new registered agent by doing one of the following: 1) complete the enclosed registered agent designation form, 2) file the current year annual report (if applicable) or 3) file an amended annual report (again, if applicable). **Each one of these filings must be submitted with the appropriate filing fee.**

If you should need any further information, please contact our office at (850) 245-6050.

Susan Payne
Senior Section Administrator
Division of Corporations

Letter number: 008A00046105

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Pro Clear Aquatic Systems, Inc
(Name of Corporation)

DOCUMENT NUMBER: P00000024616

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nikolin Lari
(Name of Contact Person)

Pro Clear Aquatic Systems, Inc
(Firm/Company)

2959 Mercury Road
(Address)

Jacksonville, FL 32207
(City/State and Zip Code)

For further information concerning this matter, please call:

Nick Lari at (904) 226-1422
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Pro Clear Aquatic Systems, Inc
2. The principal office address: 2959 Mercury Road
Jacksonville, FL 32207
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3/8/2000 Document number: P00000024616
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)


Steve Brust c/o Smith, Gamble and Russell
50 North Laura Street #2600
Jacksonville, FL 32202

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Caplan Law Firm, P.A.
6260 Dupont Station Court, Suite C
(P.O. Box NOT acceptable)
Jacksonville, FL 32217

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, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Nikolin Lari - Owner
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

12-03-08
(Date)

If signing on behalf of an entity:

Howard A. Caplan, President
(Typed or Printed Name)

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

FILED
08 DEC - 8 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA