

PO1000019089

(Requestor's Name)

POOL Rx
2447 S. Kirkwasse Rd
Orlando FL 32835
Ref # PO1000019089

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

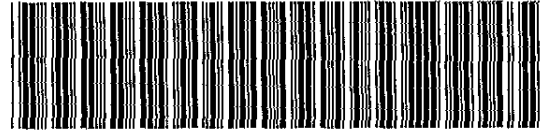
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

PO1000019089
Clerk
2-24-03

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, the undersigned corporation organized under the laws of the State of FLORIDA 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 : POOL Rx Inc.

2. The mailing address of the corporation : 5816 Masters Blvd. Orlando, FL 32819

3. Date of incorporation/qualification: 2/20/01 Document number: P01000019089

4. The name and address of the current registered agent and registered office:

ARIF RAJAN
7041 Grand National Dr. Ste 215
Orlando FL 32819

5. The name and address of the new registered agent (if changed) and /or registered office (if changed):
(P.O. Box NOT Acceptable)

KARIM POONAWALA
5816 Masters Blvd
Orlando FL 32819

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]
(Signature of an officer, chairman or vice chairman of the board)

2/19/03
(Date)

ARIF RAJAN
(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]
(Signature of Registered Agent)

2/7/03
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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