P01000084242

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ZOIO DEC TO AMITE OF STATE

R.A.

DEC: 1:3 2010

COVER LETTER

TO: An	nendment Section vision of Corporations				
SUBJECT	: FUSSELL WELL DRILL Name of Corpora	ING, INC.			
DOCUME	NT NUMBER: P010000	084242			
The enclose	ed Statement of Change of Registered Office/Ager	nt and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:					
	,	5			
LISA R. FUSSELL					
Name of Contact Person					
FUSSELL WELL DRILLING, INC.					
Firm/Company					
5469 BERKLEY RD.					
	Address	• · · · · · · · · · · · · · · · · · · ·			
AUBURNDALE, FL 33823 City/State and Zip Code					
City/State and Zip Code					
LISA@FUSSELLWELLDRILLING.COM					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
	LISA R. FUSSELL at (863) 984-3144			
	Name of Contact Person	863) 984-3144 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

statement of ch	provisions of sections 607.0502, 617.05 ange is submitted for a corporation orgo er to change its registered office or regis	nized under the laws of the State of <u>F</u>	FLORIDA
	the corporation: FUSSELL WEL		
2. The principal	office address: 5433 BERKLEY RI	D., AUBURNDALE, FL 33823	
3. The mailing	address (if different): 5469 BERKLE	Y RD., AUBURNDALE, FL 338	823
4. Date of incor	poration/qualification: 08/24/200	Document number: Pt	01000084242
	d street address of the current registered rtment of State: (If resigned, enter resign		h the
	LISA R. FUSSELL		-
	141 HOMEWOOD DR.		_
	WINTER HAVEN, FL 33880		2810 SEE
6. The name and (if changed):	d street address of the new registered ago	ent (if changed) and /or registered offic	FIL NIODEC 10 SLERETARY ALLAHASSE
	LISA R. FUSSELL		TO REPORT
	5433 BERKLEY RD.		E CATE
P.O Box NOT acceptable			
	AUBURNDALE, FL 33823		
The street address changed will	ess of its registered office and the stree be identical.	at address of the business office of its	registered agent,
Such change wanthorized by the	as authorized by resolution duly adopte he board, or the corporation has been n	ed by its board of directors or by an outlified in writing of the change.	officer so
Signatu	Aussell re of an officer or director	LISA R. FUSSELL, V.	. PRES.
I hereby accept I further agree of my duties, an document is bei corporation ha	the appointment as registered agent a to comply with the provisions of all sta ad I am familiar with and accept the ob ing filed merely to reflect a change in t s been notified in writing of this chang	nd agree to act in this capacity, ttutes relative to the proper and com digation of my position as registered he registered office address, I hereby e.	plete performance l agent. Or, if this v confirm that the
Lesa	R. Fusell	12/07/2010	
Sig	nature of Registered Agent	Date	
If signing on be	chalf of an entity:		
T	yped or Printed Name		
	* * * FILING F	EE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314