## P0300002023

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Do	cument Number)		
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Or is

## **COVER LETTER**

Makes One of Couthy and Florida	la -			
SUBJECT: Water One of Southwest Florida, Inc. (Name of Corporation)				
DOCUMENT NUMBER: P03000002023				
The enclosed Statement of Change of Registered Offic	e/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter	r to the following:			
Michael M. Barlow				
(Name of Contact Person)				
Water One of Southwest Florida, Inc. (Firm/Company)				
(c and c	orrigand)			
4840 Laredo Avenue				
(Add	ress)			
Fort Myers, Florida 33905				
(City/State and Zip Code)				
For further information concerning this matter, please	call:			
Jerrold M. Facktor	at ( 312 ) 372-3131 (Area Code & Daytime Telephone Number)			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Depar	tment of State.			
Mailing Address: Amendment Section	Street Address:			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
•	Tallahassee, FL 32301			

TO:

Amendment Section Division of Corporations

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

statement of ch	nange is submitted for a corporation org	502, 607.1508, or 617.1508, Florida Statu anized under the laws of the State of Flori istered agent, or both, in the State of Floria	ida	
1. The name of	f the corporation: Water One of Southwe	est Florida, Inc.		
	al office address: 4840 Laredo Avenue,			
3. The mailing	address (if different): same			
4. Date of incorporation/qualification: 01/06/03 Document number: P0300000		)23		
	nd street address of the current registered artment of State:	d agent and registered office on file with the	e	
	Blume, Craig D.			
	5801 Pelican Bay Blvd., Suite	103		
	Naples, Florida 34108		FEB UREI	T
6. The name ar (if changed)		gent (if changed) and /or registered office	TEB 23 AM RETARY OF AHASSEE, F	
	Barlow, Michael M.		10:5 STAT STAT	O
	4840 Laredo Avenue		हुल 🕉	
	(P.O. Box NOT accepta Fort Myers, Florida 33905	ble)		
The street add as changed wi	ress of its registered office and the stre	eet address of the business office of its reg	gistered agent,	,
Such change vauthorized by	was authorized by resolution duly adop the board, or the corporation has been	oted by its board of directors or by an offinotified in writing of the change.	icer so	
Michael M. Barlow, President (Signature of an officer of director)  Michael M. Barlow, President (Printed or typed name and title				
I hereby accept further agree of my duties, a document is be corporation he	ot the appointment as registered agent e to comply with the provisions of all s and I am familiar with and accept the c eing filed merely to reflect a change in as been notified in writing of this chan	and agree to act in this capacity. tatutes relative to the proper and complet obligation of my position as registered ag the registered office address, I hereby co ge.	te performanc gent. Or, if thi onfirm that the	e s ?
mms My	charl M Baslow	February /9 2007		
If signing on h	Signature of Registered Agent)  behalf of an entity:	(Date)		
Michael M. E	·			
The state of the s	(Typed or Printed Name)			
	* * * FILING	FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)