

PD3000101403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

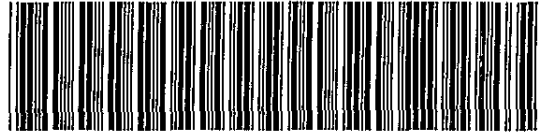
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DATE *5/5/03 on wrong line*  
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03 DEC -8 PM 1:27  
TALLAHASSEE, FLORIDA

*B 12/15/03*

*Law Offices*  
**JOHN L. AVERY, JR.**  
SUITE 207  
1001 NORTH U.S. HIGHWAY ONE  
JUPITER, FLORIDA 33477-4305

JOHN L. AVERY, JR.

TELEPHONE (561) 747-6666  
FACSIMILE (561) 744-0670

December 3, 2003

Florida Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

RE: Fountain Service Specialists, Inc.

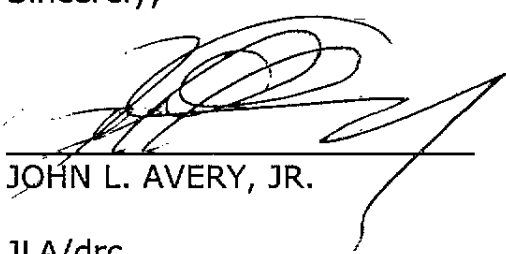
Dear Sir or Madam:

This office represents Charles Kevin Pittman, the Director of the above-described corporation.

I enclose herewith a Statement of Change of Registered Office or Registered Agent or both for Corporations form, Officer/Director Resignation for a Corporation form and our firm's check in the amount of \$70.00 for the filing fee. Please return copies of those documents to this office.

Thank you for your cooperation.

Sincerely,



JOHN L. AVERY, JR.

JLA/drc  
Enclosures

*Donna K. Adwick*

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Fountain Service Specialists, Inc.  
(Name of corporation)

DOCUMENT NUMBER: P03000101403

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:

John L. Avery, Jr., Esquire  
(Name of person)

Law Offices of John L. Avery, Jr.  
(Name of firm/company)

1001 N. U.S. Highway One, Suite 207  
(Address)

Jupiter, FL 33477

(City/state and zip code)

For further information concerning this matter, please call:

John L. Avery, Jr.

(Name of person)

at ( 561 )

747-6666

(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  
409 E. Gaines Street  
Tallahassee, FL 32399

**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: Fountain Service Specialists, Inc.
2. The principal office address: 880 Jupiter Park Drive, Suite 14  
Jupiter, FL 33458
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 9/11/03 Document number: P03000101403
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

David S. Stuart

880 Jupiter Park Drive, Suite 14

Jupiter, FL 33458

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

Charles Kevin Pittman

880 Jupiter Park Drive, Suite 14

(P.O. Box or personal mailbox NOT acceptable)

Jupiter, FL 33458

CLERK OF STATE  
TALLAHASSEE, FLORIDA

03 DEC -8 PM 1:27

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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.

Charles Kevin Pittman - RA  
(Signature of an officer or director)

Charles Kevin Pittman, Director  
(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 ABOVE  
(Signature of Registered Agent)

12/3/03  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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

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