

PO4000014661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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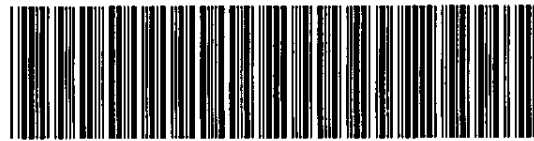
(Business Entity Name)

(Document Number)

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*Handwritten signature and initials*

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: ADVANCED IRRIGATION & PUMP REPAIR, INC.  
Name of Corporation

DOCUMENT NUMBER: P04000014661

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:

CHRISTINE D. SMALLWOOD

Name of Contact Person

CHRISTINE D. SMALLWOOD, ATTORNEY AT LAW

Firm/Company

1015 GRACE AVE SUITE A

Address

PANAMA CITY, FL 32401

City/State and Zip Code

CDSMALLWOOD@CDSLAW.ORG

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHRISTINE D. SMALLWOOD

Name of Contact Person

at ( 850 ) 215-7995

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: ADVANCED IRRIGATION & PUMP REPAIR, INC.
2. The principal office address: 6546 KEIBER CIRCLE, Youngstown, FLORIDA  
32466
3. The mailing address (if different): 6546 KEIBER CIRCLE, Youngstown, FLORIDA  
32466
4. Date of incorporation/qualification: 01/14/2004 Document number: P04000014661
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)

JEFFREY P. WHITTON

565 HARRISON AVE

PANAMA CITY, FL 32401

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

CHRISTINE D. SMALLWOOD

1015 GRACE AVE SUITE A

P.O. Box NOT acceptable

PANAMA CITY, FLORIDA 32401

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TALLAHASSEE, FLORIDA

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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.

Gary James Certalich  
Signature of an officer or director

GARY JAMES CERTALICH  
Printed or typed name and title  
**PRES.**

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.

Christine D. Smallwood  
Signature of Registered Agent

March 27, 2012  
Date

If signing on behalf of an entity:

CHRISTINE D. SMALLWOOD  
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)