## P04000108956

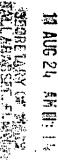
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP		MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
·		

Office Use Only



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## **COVER LETTER**

TO: Am Div	endment Section rision of Corporations	
SUBJECT:	Erickson Pumping Cor Name of Corporati	mpany on
DOCUME	NT NUMBER: PO400010	08956
The enclose	ed Statement of Change of Registered Office/Agent	and fee are submitted for filing.
Please retur	n all correspondence concerning this matter to the f	following:
	•	-
	Cheryl Erickso Name of Contact Pe	
	Erickson Pumping Co	ompany
	Firm/Company	
	940 Sweetwater Lan	e, #510
	Addiess	
	Boca Raton Florida	33431
	Boca Raton, Florida City/State and Zip C	ode
	kericpump@bellsout	th net
	E-mail address: (to be used for future ar	
For further i	information concerning this matter, please call:	
	Cheryl Erickson at (	561 . 204 8460
		rea Code & Daytime Telephone Number
Enclosed is	a \$35.00 check made payable to the Department of	State.
	Mailing Address: Amendment Section	Street Address:
		Amendment Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1		
	ange is submitted for a corporation organized under the laws of ler to change its registered office or registered agent, or both, in		
		· · · · · · · · · · · · · · · · · · ·	
	the corporation: Erickson Pumping Company		_
	d office address: 940 Sweetwater Lane, #510		_
Boca Rate	on, Florida 33431		_
3. The mailing a	address (if different):		
4. Date of incor	rporation/qualification: July 23, 2004 Document num	ber: PO4000108956	_
	nd street address of the current registered agent and registered of artment of State: (If resigned, enter resigned)	fice on file with the	
	W. Morgan Speer, P.A.		
	1800 Australian Ave S S	te 100	
	W. Palm Beach F1. 334		
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or		
	Cheryl Erickson		#
	940 Sweetwater Lane, #510	î, e	
	P.O. Box NOT acceptable	· · · · · · · · · · · · · · · · · · ·	
	Boca Raton, Florida 33431	· · · · · · · · · · · · · · · · · · ·	
The street address changed will	ress of its registered office and the street address of the busined be identical.	ess office of its registered agent,	
Such change wa authorized by the	vas authorized by resolution duly adopted by its board of dire the board, or the corporation has been notified in writing of the	ctors or by an officer so ne change.	
Nec		rickson, President	
I hereby accept I further agree of my duties, an document is bei corporation ha	t the appointment as registered agent and agree to act in this to comply with the provisions of all statutes relative to the provision of all statutes relative to the provision of am familiar with and accept the obligation of my position filed merely to reflect a change in the registered office acts been notified in writing of this change.	typed name and title capacity. roper and complete performance n as registered agent. Or, if this ldress, I hereby confirm that the	
	heesla. Com	8/22/2011	
	gnature of Registered Agent	Date	
If signing on be	ehalf of an entity:		
	Cheryl Erickson		
T	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)