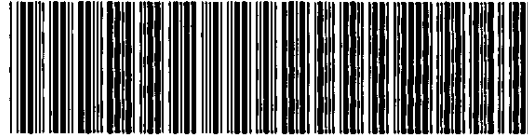


PO 4000116800



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2010 JUL 12 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RD-ADA
Cheng
SJ

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

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7-1314

**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: ELEVATED PRESSURES POWER WASHING INC

2. The principal office address: 15330 FLIGHT PATH DR
SPRING HILL FL 34604

3. The mailing address (if different): ~~SPRING HILL FL 34604~~ (Sorry)

4. Date of incorporation/qualification: MAY 1999 Document number: 59-3607310 / 184000116800

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)

JAMES E. ROY

14108 TAYCO DR

BROOKSVILLE FL 34614

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

15330 FLIGHT PATH DR

SPRING HILL FL 34604

P.O. Box NOT acceptable

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.

[Signature]
Signature of an officer or director

JAMES E. ROY
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 of Registered Agent

7-06-2010

Date

If signing on behalf of an entity:

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ELEVATED PRESSURES POWER WASHING INC
Name of Corporation

DOCUMENT NUMBER: 59-3607310 / P04000116800

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:

JAMES E. ROY
Name of Contact Person

ELEVATED PRESSURES POWER WASHING INC
Firm/Company

15330 FLIGHT PATH DR
Address

SPRING HILL FL. 34604
City/State and Zip Code

ELEVATEDINC65@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAMES E. ROY at (352) 232-4224
Name of Contact Person 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