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| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE
TALLAHASSEE F. STATE

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COVER LETTER

| TO: | Amendment Section Division of Corporations | <i>,</i> | |
|--|---|--|--|
| SUBJI | ECT: HydroPure Systems, Inc. (Name of Corpor | ration) | |
| DOCL | UMENT NUMBER: P05000029883 | | |
| The en | nclosed Statement of Change of Registered Office/Ago | ent and fee are submitted for filing. | |
| Please | return all correspondence concerning this matter to the | ne following: | |
| | Michael Lester | | |
| (Name of Contact Person) | | | |
| HydroPure Systems, Inc. (Firm/Company) | | | |
| | 209 South Alexander Street (Address) | | |
| | Plant City, Florida 33563 (City/State and Zi | p Code) | |
| For fur | rther information concerning this matter, please call: | | |
| Micha | ael Lester at (Name of Contact Person) | (813) 885-1918 (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

| statement of cha | provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this ingle is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida. | |
|--|--|--|
| 1. The name of | the corporation; HydroPure Systems, Inc. | |
| | office address: 209 South Alexander Street, Plant City, Florida 33563 | |
| 3. The mailing a | address (if different): | |
| 4. Date of incorp | poration/qualification: 2/16/05 Document number: P05000029883 | |
| | be name and street address of the current registered agent and registered office on file with the coordinate Department of State: Jennifer A. Lester | |
| | Jennifer A. Lester | |
| | 250 Belcher Road North, Suite 102 | |
| | Clearwater, Florida 33765 | |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered office | |
| | Jennifer A. Burns | |
| | 250 Belcher Road North, Suite 102 | |
| | (P.O. Box NOT acceptable) Clearwater, Florida 33765 | |
| The street addreas changed will | ess of its registered office and the street address of the business office of its registered agent, be identical. | |
| - | as authorized by resolution duly adopted by its board of directors or by an officer so he board, on the comporation has been notified in writing of the change. | |
| Much | Michael D. Lester President Wire of an officer or director) Michael D. Lester President | |
| I hereby accept I further agree of my duties, an document is bei corporation has | the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change. | |
| 11 | 1/19/27 | |
| ′ 1 | ehalf of an entity: | |
| (1 | Typed or Printed Name) | |

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