POS000096072

(Requ	estor's Name)	
(Addre	ss)	<u> </u>
(Address)		
(City/S	tate/Zip/Phon	e #)
	·	•
PICK-UP	WAIT	MAIL
/Rucin	ess Entity Nar	ma)
(Duain	ess chury Mai	ne)
(Docul	ment Number)	!
Certified Copies	Certificate	s of Status
<u> </u>		
Special Instructions to Fili	ng Officer:	





700079269117

09/01/06--01005--013 **35.00

FILED

SEP-I PM I: 48

g RA change

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Underground Irrigation Products, Inc. (Name of Corporation)	n)
DOCUMENT NUMBER: P05000096072	
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.
Please return all correspondence concerning this matter to the fo	ollowing:
G. Alan Howard, Esq. (Name of Contact Pers	son)
Milam Howard Nicandri Dees & Gillam (Firm/Company)	ı, P.A.
14 East Bay Street (Address)	
Jacksonville, FL 32202	
(City/State and Zip Co	ode)
For further information concerning this matter, please call:	
G. Alan Howard at (9	04 357-3660 rea Code & Daytime Telephone Number)
(Name of Contact Person) (A	rea 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.
The name of the corporation: Underground Irrigation Products, Inc.
2. The principal office address: 4348 Roma Blvd., Jacksonville, FL 32210
3. The mailing address (if different): 4348 Roma Blvd., Jacksonville, FL 32210
4. Date of incorporation/qualification: 7/7/05 Document number: P05000096072
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Mílam Howard Nicandri Dees & Gillam, P.A.
50 N. Laura Street, Suite 2900
Jacksonville, FL 32202
6. The name and street address of the new registered agent (if changed) and /or registered office.
Milam Howard Nicandri Dees & Gillam, P.A.
14 East Bay Street
(P.O. Box NOT acceptable)
Jacksonville, FL 32202
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 of an officery) dijector) CHCI's STELLES PES. (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) (Date)
If signing on behalf of an entity: (Typed or Pfinted Name)

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