P05000115433

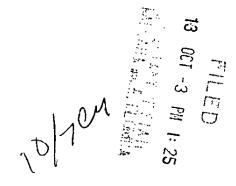
(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: D. Watson Services Inc. Name of Corporation			
DOCUMENT NUMBER: <u>P05000115933</u>			
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:			
Name of Contact Person			
Firm/Company			
2604 Shadecrest Rol Address			
2604 Shadicrest Rol Address Land o lakes FL 34639 City/State and Zip Code Dot 1014(9) and com E-mail address: (to be used for future annual report notification)			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (813) 505-3197 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 Street Address: Amendment Section Division of Corporations Division of Corporations Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314



September 19, 2013

DILLON HARRIS 2604 SHADECREST RD LAND O LAKES, FL 34639

SUBJECT: D. WATSON SERVICES, INC.

Ref. Number: P05000115933

We have received your document for D. WATSON SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please add the name of the registered agent to part 6 of your form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 413A00022096

Carol Mustain Regulatory Specialist II

www.sunbiz.org

Division of Compositions D.O. POV 6297 Tollohogges Floride 2921



-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: Dwatson Services Frac
2. The principal office address: 2Boy Shadecrest Rd Land O Lakes, FL 34639
3. The mailing address (if different):
4. Date of incorporation/qualification: 8-15-2005 Document number: Posoco115933
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) Resigned
6. The name and street address of the new registered agent (if changed) and /or registered office. (if changed): Dillon Harris 2604 Shaclovest Ad Land O Lakes FL 34639 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.
Value Value of an officer or director VP Value of typed name and title VP Value of 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. On the proper and complete performance of my position as registered agent. On the proper and complete performance 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. On the proper and complete performance of my position as registered agent. On the proper and complete performance of my position as registered agent. On the proper and complete performance of my position as registered agent. On the proper and complete performance of my position as registered agent. On the proper and complete performance of my position as registered agent. On the proper and complete performance of my position as registered agent. On the proper and complete performance of my position as registered agent.
If signing on behalf of an entity: Typed or Printed Name

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