## P06000045640

(Re	equestor's Name)	1
(Ad	ldress)	· ,
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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KHA

## **COVER LETTER**

TO: Registration Section Division of Corporations	
4 H20 J	nc
SUBJECT: (Name of Alien Busines	······································
Dear Sir or Madam:	
The enclosed Statement of Change of Registered Agent/Reg fee(s) are submitted for filing.	stered Office for Alien Business Organization and
Please return all correspondence concerning this matter to the	e following:
Linda Phillips (Name of Person)	
4 HZO Onc	
(Firm/Company)	
6305 Five acre Rd	
(Address)	
Plant City FL 33565	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Linda Phillips at 813.	368-8080
(Name of Person) (Area Code &	Daytime Telephone Number)
Registration Section Registrat Division of Corporations Division Clifton Building P.O. Box	ion Section of Corporations 6327 see, Florida 32314
Enclosed is a check for the following amount:	•
\$35.00 Filing Fee	\$43.75 Filing Fee & Certified Copy

INHS23 (08/05)

## STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO CHANGE ITS REGISTERED OFFICE AND/OR REGISTERED AGENT:
1. 4 H2O Onc. (Name of alien business organization)
(Name of alien business organization) 2. 3-29-06 3. PO6000045640 4.
2. 3-29-06 3. POWOOO 45640 4.  (Florida registration date) (Florida document number) (FEI Number, if applicable)  5. 6305 Five acre Rd Plant City FL 33565
(Principal office address)
6. Name and address of registered agent and office currently on record with this office:  BUSINESS Filings and.  1203 GOVENDOY'S SQUARE BIVE STE. 101
1203 Governor's Square Blvd Ste. 101
Tallahassee FL 32301-2960
7. New registered agent and/or office address:  Linda Phillips  6305 Five acre Rd  Plant City FL 33565  (Note: Registered office must be a Florida street address)
(Note: Registered office must be a Florida street address)  8. The street address of the registered office and the street address of the business office of the registered agent are identical.  9. Such change was authorized by the board of directors or an officer of the corporation so authorized by the board of directors.
10. Signature of chairman, vice chairman, or officer)
11. (Name and capacity of person signing in number 10 above)
12. Signature of new registered agent, if applicable:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.
(Registered agent accepting appointment)

**FILING FEE: \$35.00** 

Make checks payable to Florida Department of State and mail to: Division of Corporations P. O. Box 6327 - Tallahassee, FL 32314