P06000061098

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
principal & mailing address change			
address change			
onty C.L.			
1,41			

Office Use Only



100272340861

05/04/15--01003---002 **35.00

C/3/5

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Floaters Portable Sanitation Inc

Name of Corporation

DOCUMENT NUMBER, P06000061098

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:

Jason R. Green

Name of Contact Person

Floaters Portable Sanitation

Firm/Company

1509 Faye Road

Address

Jacksonville, Florida 32218

City/State and Zip Code

jrgtile@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Green

.,904

8136845

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	inge is submitted for a corporation org	9502, 607.1508, or 617.1508, Florida Statutes, this ganized under the laws of the State of Florida gistered agent, or both, in the State of Florida.	
	the corporation: Floaters Portable	·	
2. The principal	office address: 1509 Faye-Road	Jacksonville Florida 32218	
			
3. The mailing a	ddress (if different): 13075 Lanie	r Road, Jacksonville Florida 32226	
4. Date of incorp	poration/qualification: 4-27-2006		
	d street address of the current registere rtment of State: (If resigned, enter resigned)	ed agent and registered office on file with the gned)	
	Jason R. Green		
	13075 Lanier Road		
	Jacksonville, Florida 32226	5	
6. The name and (if changed):	I street address of the new registered a	agent (if changed) and /or registered office	
	SAME - NO CHANGE		
	P.O. Box NOT acceptable		
The street addre	ess of its registered office and the street be identical.	eet address of the business office of its registered agent,	
Such change wa authorized by th	as authorized by resolution duly adop ne board on the corporation has been	nted by its board of directors or by an officer so notified in writing of the change.	
Signatur	re of all officer or diseases	Jason R. Green Printed or typed name and title	
Therety accept I further agree to performance of agent. Or, if the	the appointment as registered agent to comply with the provisions of all s my duties, and I am familiar with an	and agree to act in this capacity. tatutes relative to the propagation and complete d accept the obligation of my position as registered reflect a change in the registered office address, I	
	11/2	4-28-15	
ſ	nature of Registered Agent	Date	
/	half of an entity:		
Jason R. G	Vived or Printed Name		

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