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R.A. Charge C.COULLIETTE

JAN 07 2010

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Humitech of Orlando, Inc dba AirSciences Int'l, Inc Name of Corporation			
DOCUMENT NUMBER: 61-8013858784-9			
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:			
Joseph E. Caudle			
Name of Contact Person			
Humitech of Orlando, Inc, dba AirSciences Int'l, Inc			
Firm/Company			
15808 Glenarn Drive Address			
. ,			
Tampa Fl 3361	ρ		
Tampa, FL 33618 City/State and Zip Code			
mflyerla@aol.con E-mail address: (to be used for future an			
E-man address. (to be used for future annual report normation)			
For further information concerning this matter, please call:			
Joseph E. Caudle at (407) 758-0555		
Joseph E. Caudle at (407) 758-0555 Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Enclosed is a 455.00 check made payable to the Separtment of State.			
Mailing Address:	Street Address:		
Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		
Tallahassee, FL 32301			
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CR2E045 (8/05)			

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

statement of cl	ne provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florid hange is submitted for a corporation organized under the laws of the State of der to change its registered office or registered agent, or both, in the State of	f Florida
1. The name o	of the corporation: Humitech of Orlando, Inc	<u> </u>
2. The principa	al office address: 15808 Glenarn Drive, Tampa, FL 33618	
3. The mailing	g address (if different): Same	
4. Date of inco	orporation/qualification: January 11, 2007 Document number:	P07000004923
	and street address of the current registered agent and registered office on file partment of State: (If resigned, enter resigned)	with the
	Joseph E. Caudle	
	5931 Seaside Drive	
	New Port Richey, FL 34652	
6. The name at (if changed)	and street address of the new registered agent (if changed) and /or registered on:	office CREI
	Joseph E. Caudle	ARN ARN
	15808 Glenarn Drive	
	P.O. Box NOT acceptable Tampa, FL 33618	Los de Co
as changed wi	dress of its registered office and the street address of the business office o ill be identical.	f its registered agent,
Such change vauthorized by	was authorized by resolution duly adopted by its board of directors or by the board, or the corporation has been notified in writing of the change.	an officer so
- Signa	Joseph E. Caud attrict an officer of director Printed or typed name an	le, CEO
I hereby accel I further agree of my duties, of document is b corporation h	ept the appointment as registered agent and agree to act in this capacity, the to comply with the provisions of all statutes relative to the proper and cand I am familiar with and accept the obligation of my position as registed being filed merely to reflect a change in the registered office address, I he has been notified in writing of this change.	complete performance ered agent. Or, if this reby confirm that the
Joz	Senature of Registered Agent Date Date	2009
HUMITE	behalf of an entity: ECH OF ORLANDO, INC. 1/ 5	
apa h	Typed or Printed Name	
	* * * FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)