

PD10001035A

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

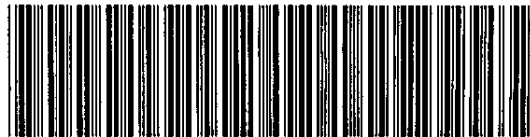
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

R. White

MAY 11 2015
R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ADVANCED DRAIN SERVICES CORP

Name of Corporation

DOCUMENT NUMBER: P07000103579

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:

GUILLELMO DIAZ

Name of Contact Person

ADVANCED DRAIN SERVICES CORP

Firm/Company

12754 SW 204 STREET

Address

MIAMI FL 33177

City/State and Zip Code

GDIAZ1971@LIVE.COM

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

For further information concerning this matter, please call:

GUILLELMO DIAZ

Name of Contact Person

Area Code & Daytime Telephone Number

786 2878546

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.

1. The name of the corporation: ADVANCED DRAIN SERVICES CORP
2. The principal office address: 12754 SW 204 STREET
MIAMI FL, 33177
3. The mailing address (if different): _____

4. Date of incorporation/qualification: SEPT 17 2007 Document number: P07000103579

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)

LISSETTE M. LAZO

9400 SW 54 STREET MIAMI FL, 33165

RESIGNED

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

GUILLERMO DIAZ

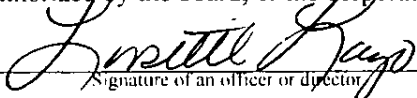
12754 SW 204 STREET

P.O. Box NOT acceptable

MIAMI FL, 33177

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.

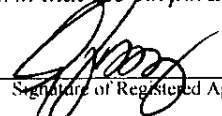


Signature of an officer or director

LISSETTE M LAZO VP

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

04/23/2015

Date

If signing on behalf of an entity:

GUILLERMO DIAZ

Typed or Printed Name

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