## 109000017628

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PICK-UP	WAIT	MAIL MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Fi	iling Officer:	
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Office Use Only



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R.A. Change C.COULLIETTE

MAR 0 5 2010

**EXAMINER** 

## **COVER LETTER**

TO:	Amendme Division o	ent Section of Corporations			
SUBJ	JECT:	ADVANCED WATER Name of	RJET SOLUTIONS  Corporation		
DOC	UMENT NU	JMBER: P0	9000017628		
The e	nclosed State	ement of Change of Registered Off	ice/Agent and fee are submitted for filing	g.	
Pleas	Please return all correspondence concerning this matter to the following:				
		ROBER Name of C	T MONTES Contact Person		
			ERJET SOLUTIONS		
		rimi	Company		
		11301 SW	95 STREET		
		Ac	ddress		
		Miami, Fl City/State	orida 33176 and Zip Code	•	
	-	RMONTES@DEAN E-mail address: (to be used for	GELOMARINE.COM  future annual report notification)		
For fi	urther inform	ation concerning this matter, pleas	e call:		
		ROBERT MONTES	at ( 954 ) 629-9 Area Code & Daytime Telepho	711	
-	Na	me of Contact Person	Area Code & Daytime Telepho	ne Number	
Enclo	osed is a \$35.	00 check made payable to the Dep	artment 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 C Tallahassee, FL 32301		

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

statement of char	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of FLORIDA to change its registered office or registered agent, or both, in the State of Florida.
	ne corporation: ADVANCED WATERJET SOLUTIONS office address: 3309 SW 11TH AVENUE FORT LAUDERDALE, FLORIDA 33315
3. The mailing ac	ddress (if different):
4. Date of incorp	oration/qualification: 2/24/2009 Document number: P09000017628
	street address of the current registered agent and registered office on file with the rment of State: (If resigned, enter resigned)
	SPIEGEL & UTRERA PA
	1840 SW 22 STREET 4TH FLOOR
	Miami, Florida 33145
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office  ROBERT MONTES
	11301 SW 95 STREET
	P.O. Box NOT acceptable  P.O. Box NOT acceptable  Miami, Florida 33176
	ss of its registered office and the street address of the business office of its registered agent, be identical.
	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
/ Julius Signatur	ROBERT MONTES  e of an officer or director  Printed or typed name and title
I further agree to	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
114	FEBRUARY 25, 2010
	half of an entity:
Ту	ped 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)