P10000100388

(Re	questor's Name)					
(Ad	dress)					
(Ad	dress)					
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Do	cument Number)					
Certified Copies	_ Certificates	of Status				
Special Instructions to	Filing Officer:					

Office Use Only



000227858100

04/12/12--01011--023 **35.00

to of

12 APR 12 AM II: 10
SECRETARY OF STATE
AND ANASSES FI ORION

APR 1 3 2012 T. ROBERTS

COVER LETTER

TO:	Amendment Division of C	Section Corporations			
SUBJ	ECT:	AQ-Tech Envir	onmental Se	ervices, Inc.	
			•		
DOC	JMENT NUM	BER:	P1000010	00388	
The er	closed Stateme	ent of Change of Registe	red Office/Agent	and fee are submitted for filing.	
Please	return all corre	spondence concerning t	his matter to the	following:	
				•	
			lames S. Moo	re	
		Na	me of Contact Pe	rson	
		AQ-Tech E	nvironmental	Services, In.	
			Firm/Company		
		6	17 SE 43rd A	/e.	
			Address		
		C	Ocala, FL 3447	71	
	_	Cit	y/State and Zip C	Code	
		soott me	oro@aa toobi	no com	
	E		oore@aq-techi sed for future a	nnual report notification)	
	_			,	
r c .			1		
ror Iui	ther informatio	on concerning this matter	r, piease caii:		
	Ja	mes S. Moore	at (352) 512-0732	
	Name	of Contact Person	A	Area Code & Daytime Telephone Number	_
Enclos	ed is a \$35.00 (check made payable to the	ne Department of	State.	
		Mailing Address:		Street Address:	
		Amendment Section		Amendment Section	
		Division of Corpora P.O. Box 6327	itions	Division of Corporations	
		Tallahassee, FL 323	R14	Clifton Building 2661 Executive Center Circle	
		. a.i.a.i.a.boo, 1 11 525	• •	Tallahaccee FI 32301	

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

statement of cha	ange is submitted for a cor	poration organi	2, 607.1508, or 617.1508, Flo zed under the laws of the Sta red agent, or both, in the Sta	te of Florida
	the corporation: AQ-Te office address: 617 SE		mental Services, Inc ala, FL 34471	<u>>.</u>
3. The mailing a	address (if different):		44. 11.40.	
4. Date of incor	poration/qualification:	1-1-11	Document number:	P10000100388
	d street address of the curr rtment of State: (If resigne		ent and registered office on t	file with the
	James S. Moore			
	1730 SW 23rd Ter.			
	Fort Lauderdale, FL	33312		,
6. The name and (if changed):	d street address of the new James S. Moore	registered agent	(if changed) and /or register	red office PSE
	617 SE 43rd Ave.			- From F
	Ocala, FL 34471	P.O. Box NOT	acceptable	OFFICE TO
The street address changed will		and the street a	ddress of the business offic	e of its registered agent,
Such change wa	as authorized by resolution board, or the corporati	on duly adopted	by its board of directors or ified in writing of the chang	by an officer so
6.6	re of an officer or director		Printed or typed nam	Moore ne and title
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as regis to comply with the provis ad I am familiar with and ing filed merely to reflect s been notified in writing	tered agent and ions of all statu accept the oblig a change in the of this change.	l agree to act in this capacit tes relative to the proper ar gation of my position as reg registered office address, l	ty, id complete performance istered agent. Or, if this hereby confirm that the
5.	h		4-10-	/2
Ü	nature of Registered Agent		Date	
If signing on be	half of an entity:			
T	yped or Printed Name			

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