P11000008269

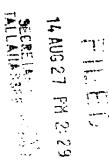
(Requestor's Name)						
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PICK-UP WAIT MAIL						
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Special Instructions to Filing Officer:						
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Office Use Only



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COVER LETTER

Division of	of Corporations		.,
SUBJECT:	ALL AMERICAN Pools - Name of Corpo	TNC Dration	-
DOCUMENT NO	UNADED DILAA		
DOCUMENT N	UMBER: <u>P1100000 8269</u>		-
The enclosed Stat	ement of Change of Registered Office/A	gent and fee are submitted for	filing.
Please return all c	orrespondence concerning this matter to	the following:	
	GARY WILLIAMS Name of Contac		
	ALL AMERICAN POOL Firm/Comp	LS INC	
	Firm/Comp	any	一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一
	5 KELLY WAY		15 CO
	5 KELLY WAY Address		
:	ALL AMERICAN POOR Firm/Comp 5 KELLY WAY Address VALPARAISO FL 32 City/State and Z	580	PH 2
	City/State and 2	ip Code	8 E N
	ALLAMERICAN POOLS INC	YAHOO.COM	
	E-mail address: (to be used for future	re annual report notification)	
	nation concerning this matter, please call:		νI
Na Na	Williams a	Area Code & Daytime Tele	nhone Number
	.00 check made payable to the Departme		phone : tamou
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporation Clifton Building	ons
	r Circle		

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 6, 2014

GARY WILLIAMS
ALL AMERICAN POOLS INC.
5 KELLY WAY
VALPARAISO, FL 32580

SUBJECT: ALL AMERICAN POOLS INC.

Ref. Number: P11000008269



We have received your document for ALL AMERICAN POOLS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to our information the currect registered agent is listed as United States Corporation Agents, Inc. Please correct your application accordingly.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 914A00016300

14 AUG 27 AM II: III

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

statement of cha	nge is submitted fo	ons 607.0502, 61.7.0502 or a corporation organi istered office or registe	ized under th	e laws of the State of	FL	nis ———	
1. The name of t	he corporation:	ALL AMERICAN	Pools	INC			
2. The principal	office address:	5 KELLY WAY					
		CAL PARASO, FL	32580				
3. The mailing a	nddress (if different	1):			·	·	
4. Date of incorp	poration/qualificati	ion:JAN 25, 2011	Docum	ent number: <u>P/100</u>	10008269	,	
		the current registered at resigned, enter resigned		stered office on file v	vith the		
	UNITED STAT	ES CORPORATION	AGENTS IN	/c	-		
		ING GAKS BLUD			_		
		33612					
6. The name and (if changed):	l street address of t	the new registered agentagents Inc. ky Point Dr. STE PO. Box NOT	t (if changed) and /or registered o	ffice 2 1	14 AUG 27	ellede gerig Gerie ellede squi galacter
	Registered A	gents Inc.			<u></u>	7 PK	السقيدة
	3030 N. Roc	ky Point Dr. STE	150A		<u>.</u>	.; ≥:	
	Tampa, FL 3	P.O. Box NOT	acceptable		# 12 	29	
The street address changed will	ess of its registered be identical.	d office and the street a	address of the	e business office of i	ts registere	d age	nt,
_	as authorized by re ne board, or the co	solution duly adopted rporation has been not	by its board ified in writi	of directors or by an ng of the change.	officer so		
Signatu	re of an officer or directo	ır	GARY W	Printed or typed name and ti	ilc		
I further agree i performance of	to comply with the mv duties, and I a	is registered agent and provisions of all statum familiar with and acting filed merely to refleon has been notified in	l agree to ac tes relative t ecept the obl ct a change writing of t	t in this capacity. To the proper and con igation of my position	mplete on as registe	ered I	-
If signing on be	half of an entity:						
Dan Keen-I	President						
т.	med or Printed Name						

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