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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: FLORIDA WATER TECHNOLOGIES INC.

Name of Corporation

DOCUMENT NUMBER: P11000030869

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:

Name of Contact Person

ROTH LAW FIRM PL

Firm/Company

6100 GREENLAND RD., STE 604

Address

JACKSONVILLE, FL 32258

City/State and Zip Code

JB@ROTHLAWFIRM.NET

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

For further information concerning this matter, please call:

JB ROTH

Name of Contact Person

at (904) 595-7900

Area Code & Daytime Telephone Number

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

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of FLORIDA er to change its registered office or registered agent, or both, in the State of Florida. | |
|--|--|---|
| 1. The name of i | the corporation: FLORIDA WATER TECHNOLOGIES INC. Lottice address: 8917 WESTERN WAY, STE 8, JACKSONVILLE, FL 32256 | |
| 3. The mailing a | address (if different): | |
| 4. Date of incorp | poration/qualification: 03/29/2011 Document number: P11000030869 | |
| | d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned) | |
| | ROTH LAW FIRM PL | |
| | 234 CANAL BLVD., SUITE 2 | |
| | PONTE VEDRA BEACH, FL 32082 | |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered agent (if changed) agent | 1 |
| | 6100 GREENLAND RD., SUITE 604 | _ |
| | P.O. Box NOI acceptable | _ |
| | JACKSONVILLE, FL 32558 | - |
| The street address changed will | ess of its registered office and the street address of the business office of its registered agent, be identical. | |
| Such change wa authorized by th | as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change. | |
| 1500 | BRAD BERDON, PRESIDENT Provided by typed pages and title | |
| l hereby accept l further agree (performance of agen - Or it thi | the apparament as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete 'my dities, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address. I that the corporation has been notified in writing of this change. | |
| 5 | B 9 1 1 | |
| 4 | chalf of an entity: | |
| JEAN B. RO | | |
| | yped or Printed Name | |

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