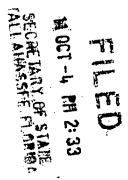
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10/04/11--01017--021 **35.00



PAChang 10-07-11

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: LATITUDE INDUSTRIAL WATER SOLUTIONS, INC. Name of Corporation						
DOCUMENT NUMBER: P11000047661						
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:						
MATTHEW J COHEN Name of Contact Person						
LATITUDE INDUSTRIAL WATER SOLUTIONS, INC. Firm/Company						
2595 NW BOCA RATON BLVD, STE 100 Address						
BOCA RATON, FL 33431 City/State and Zip Code						
ngreco@latitudesolutions.net E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
\ Nancy Greco at (561) 417-0644						
Name of Contact Person at (561) 417-0644 Name of Contact Person 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 Street Address: Amendment Section Division of Corporations						

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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

			507.1508, or 617.1508, Fla			
			d under the laws of the Sta d agent, or both, in the Sta			
			TRIAL WATER SC			
		NW BOCA RATE	ON BLVD. SUITE #10	10		
	TON, FL 33431					
3. The mailing a	address (if different):	,				
4. Date of incorp	poration/qualification: _	05/18/2011	Document number:	P11000047661		
	d street address of the curtment of State: (If resign		t and registered office on	file with the		
	MATTHEW J CO	HEN				
	190 NW SPANISI	HRIVER BLVD,	SUITE 101			
	BOCA RATON, F	L 33431		A C		
6. The name and (if changed):	d street address of the no	ew registered agent (i	f changed) and /or register	red office of the second of th		
	MATTHEW J CO	HEN				
	2595 NW BOCA RATON BLVD, SUITE 100					
	BOCA RATON, F	P.O. Box NOT ac L 33431	ceptable	· · · · · · · · · · · · · · · · · · ·		
The street addre	ess of its registered offi be identical.	ice and the street add	dress of the business offic	ee of its registered agent,		
Such change wa authorized by th	as authorized by resolute board, or the corpor	tion duly adopted by ation has been notification	y its board of directors or ed in writing of the chang	by an officer so ge.		
MIT (re of an officer or director		MATTHEW J C	OHEN, CFO		
l further agrée l of my duties, an document is bei	the appointment as re to comply with the pro to I am familiar with a ing filed merely to refle s been potified in writing	visions of all statute nd accept the obliga act a change in the r	gree to act in this capaci s relative to the proper a tion of my position as reg egistered office address, i	ty, nd complete performance gistered agent. Or, if this I hereby confirm that the		
m 5 (والما		9/30/2	011		
	mature of Registered Agent chalf of an entity:		Date			
	TTHEW J COHEN					
	uned or Printed Name					

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