| (R | equestor's Name) | |
|---|---------------------|-------------|
| (A | ddress) | |
| (A | ddress) | |
| (C | ity/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (B | Business Entity Nan | me) |
| (C | Occument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
| <u>:</u> | | |
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Office Use Only



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COVER LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: A Better Waa |
| Name of Corporation |
| DOCUMENT NUMBER: |
| 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: |
| Fred R. Lewter |
| Name of Contact Person |
| A Better Waa |
| Firm/Company |
| 1106 Harbor Lane |
| Address |
| Gulf Breeze, Florida 32563 |
| City/State and Zip Code |
| flewter@digitalcheck.com |
| E-mail address: (to be used for future annual report notification) |
| |
| For further information concerning this matter, please call: |
| Fred Lewter Name of Contact Person at (850) 932-1239 Area Code & Daytime Telephone Number |
| 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** 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

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida. |
|---|
| 1. The name of the corporation: A Better Waa |
| 2. The principal office address: 1106 Harbor Lane Gulf Breeze, FL 32563 |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: 6/18/2013 Document number: P/30000 5247 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) Ovpowation State: (If resigned, enter resigned) Jallahassee, Fl. 32301 6. The name and street address of the new registered agent (if changed) and /or registered office |
| (if changed): Hold tarbor Lane P.O. Box NOT acceptable Coulf Breeze, FL 32563 |
| The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical. |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the eprporation has been notified in writing of the change. Signature of an other or director I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filled merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. Signature of Resistered Agent If signing on behalf of an entity: |
| Fred Lewter Typed or Printed Name |

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