

P13000066115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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T. CARTER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DT Emergency Service Inc

Name of Corporation

DOCUMENT NUMBER: P13000066115

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:

Dawn Burnett

Name of Contact Person

PuroClean Emergency Recovery Service

Firm/Company

352 Coco Plum Court

Address

Oldsmar FL 34677

City/State and Zip Code

burnett@puroclean.com

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

For further information concerning this matter, please call:

Dawn Burnett

Name of Contact Person

at (865) 368-6711

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: DT Emergency Service Inc
2. The principal office address: 352 Coco Plum Ct Oldsmar FL 34677
3. The mailing address (if different): POB 2601, Oldsmar FL 34677
4. Date of incorporation/qualification: August 2013 Document number: P13000066115
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)

Dawn Burnett

11940 Royce Waterford Circle

Tampa FL 33626

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Dawn Burnett

352 Coco Plum Ct

P.O. Box NOT acceptable

Oldsmar FL 34677

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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 corporation has been notified in writing of the change.


Signature of an officer or director

Dawn Burnett
Printed or typed name and title

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 filed 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 Registered Agent

Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)