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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: WATERMEN PLUMBING INC. 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:		
Name of Contact Person		
WATERMEN PLUMBING INC Firm/Company		
1830 Radius Dr. Unit 1018 Address		
Hollywood Flor: da 33020 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
VoseF WASSERMANN at (954) 997 5797 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

rursuant 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: WATERMEN PLUMBING INC.
2. The principal office address: 3120 SW 19th Street Hallandale Beach
FL 33009
3. The mailing address (if different): 1830 Radius Dr. Un:+ 1018
40/4W000 FC 53020
4. Date of incorporation/qualification: 08/21/2015 Document number: P150000 70630
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)
Stok folk + kon, PA
18851 NE Z9HO AVE
Suite 1005 Aventura FI 33180 (Resigning)
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Yosef Wassermann PS =
1830 Radius Dr. Unit 1018 P.O Box NOT acceptable
Hollywood FL 33020
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 NoseF WASSerman / President Printed or typed name and file
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 porporation has been notified in writing of this change.
04/15/17
Signature of Registered Agent Date
If signing on behalf of an entity:
Yosef Wassermann
Typed or Printed Name

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

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