## P17000066645

(Requestor's Name)					
(Address)					
,					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Definited dopies Definitelities of Status					
Special Instructions to Filing Officer:					
J. HORNE					
DEC 15 2021					
DEC 12 5051					

Office Use Only



11/29/21--01011--014 \*\*35.00

2021 NOV 29 AH 9: 35

## **COVER LETTER**

TO:	Amendment Section Division of Corporations	•
CIID II	ECT: H2O GEOSOLUTIONS, INC.	
Name	of Corporation	
DOCU	MENT NUMBER: P17000066645	
The en	closed Statement of Change of Register	ed Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning th	is matter to the following:
Noah I	3. Kugler	
Name	of Contact Person	<del></del>
H2O C	EOSOLUTIONS, INC.	
Firm/C	Company	
PO Bo	x 1035	
Addre	SS	
Littleto	on, CO 80160-1035	
City/S	tate and Zip Code	
	nkugler@h2ogeosolutions.c	com
E-mai	l address: (to be used for future annu	al report notification)
For fu	rther information concerning this matter.	. please call:
Noah I	3. Kugler	at (239 ) 220-1796  Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to th	te Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha-	provisions of sections 607.0502, 617.050 nge is submitted for a corporation organ r to change its registered office or registe	ized under the laws of the State of Flot	ida	· · · · · · · · · · · · · · · · · · ·	
1. The name of t	he corporation: H2O GEOSOLUTIONS.	INC.			
2. The principal	office address: 7387 Riverview Dr. Webste	er, FL 33597			
3. The mailing a	ddress (if different). PO Box 1035, Littlet	on. CO 80160-1035			
4. Date of incorporation/qualification: 08/08/2017 Document number: P17000066645					
5. The name and	street address of the current registered a tment of State: (If resigned, enter resigned)	gent and registered office on file with t			
	Noah B. Kugler (resigned)				
	1905 SW 13th Lane				
	Cape Coral, FL 33991				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):    Bradibil Bradley A, Hall					1 7
	20895 Villarcal Way		1.00	A	ľ
P.O. Box NOT acceptable				9: 35	(
	North Fort Myers, FL 33917			<b>3</b> 5	
The street addre	ss of its registered office and the street be identical.	address of the business office of its re	gistered	agent,	
-	s authorized by resolution duly adopted e board, or the corporation has been no				
1.	UB VILL	Noah B. Kugler, President			
-	e of an officer or director	Printed or typed name and title			
I hereby accept I further agree t of my duties, am document is ben corporation has	the appointment as registered agent and comply with the provisions of all state I am familiar with and accept the obling filed merely to reflect a change in the been notified in writing of this change.	d agree to act in this capacity, ites relative to the proper and comple gation of my position as registered ag e registered office address, I hereby co	te perfor gent. Or onfirm ti	rmance if this nat the	
modlen t	+ Hall	11/15/2021			
Sign	nature of Registered Agent	Date		<del></del>	
If signing on bel	nalf of an entity:				
radley	A. Hall ped or Printed Name				

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