## P9600029/70

| (Re                     | equestor's Name)   |  |  |  |  |  |  |
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## **COVER LETTER**

| TO: Amendment Section Division of Corporations  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|
| SUBJECT: Talbot Environmental, Inc. (Name of corporation)   |  |  |  |  |  |  |  |  |  |
| DOCUMENT NUMBER: P96000029170   |  |  |  |  |  |  |  |  |  |
| 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:   |  |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |  |
| Timothy Talbot (Name of contact person)   |  |  |  |  |  |  |  |  |  |
| (Name of contact person)  |  |  |  |  |  |  |  |  |  |
| Talbot Environmental, Inc.  |  |  |  |  |  |  |  |  |  |
| Talbot Environmental, Inc. (Firm/Company)   |  |  |  |  |  |  |  |  |  |
| 239 Hunt Club Blvd. Suite 201 (Address)   |  |  |  |  |  |  |  |  |  |
| Longwood, Flor1da 32779  (City/state and zip code)  |  |  |  |  |  |  |  |  |  |
| For further information concerning this matter, please call:  |  |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |  |
| Timothy J. Talbot at (407 ) 682 2070 (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 Division of Corporations 409 E. Gaines Street Tallahassee, FL 32319 |  |  |  |  |  |  |  |  |  |

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

| Pursuant to the p<br>statement of chai  | •   |  |  |   |   |                        |                                      |                                | _                |
|---|---|--|--|---|---|------------------------|--------------------------------------|--------------------------------|------------------|
| in order  | r to change its re                                      | gistered offic                                   | e or register                                  | red agent, o                                  | r both, in the                              | State of F             | lorida.                              |                                |                  |
| 1. The name of t  | he corporation:   | Talbot E   | nvironme                                       | ntal, I                                       | nc.   | 248                    | ALL                                  | 무                              |                  |
| 2. The principal  | _   | 239 Hunt   | Club Bl  | vd. Suit                                      | e 201                                       |                        | 至                                    | 0.50                           |                  |
|   |   | Longwood   | , Florid                                       | la 32779                                      |   | 24 A¥                  | Sign                                 | =                              | -                |
| 3. The mailing a  | ddress (if differe                                      | nt): N/A   |  |   |   | <u> </u>               | E C                                  | 呈                              | T                |
|   |   | ,  | 0 1e   | <u> </u>                                      | <u> </u>                                    | <b>元</b>               | 70                                   |                                |                  |
| 4. Date of incorp   | oration/qualific  | ation: <u>4/0</u>                                | 2/96   | Docum   | nent number                                 | P96000                 | 029                                  | 38                             |                  |
| 5. The name and   |   |  |  |   |   |                        | 77                                   |                                | ·                |
|   | J   | . Jurgens  | , Esq.   |   | gh. N I                                     | a. <del></del>         | ٠ -                                  |                                |                  |
|   | 505 Weki  | va Spring  | s Road,  | Suite !                                       | 500   | ·                      | <u></u>                              |                                |                  |
|   | L   | ongwood,   | Florida  | 32779   | प्रत्यकृतीसः स्टब्स्ट <del>की की कव</del> ी | C AME TO               | <u>a</u>                             |                                |                  |
| 6. The name and (if changed):   | l street address o                                      | f the new regi                                   | istered agen                                   | t (if change                                  | d) and /or reg                              | gistered off           | ice                                  |                                |                  |
|   | T   | imothy J.  | Talbot   | <u>ده د مدی درد د</u>                         | <u> </u>                                    | <u> </u>               | <b>⊠</b> (*) ** * *                  |                                |                  |
|   | 239 Hun   | t Club Bl  | vd. Suit                                       | e 201_  | * - <u></u>                                 | <u></u>                | <u> </u>                             |                                |                  |
| ·   |   | ` '  | OT acceptable)                                 |   |   |                        |                                      |                                |                  |
|   |   | ongwood,   | Florida  | 32779   | au revolvent (los andt les grille           | 2 - 1 - 1 - T          | <b>4</b> .                           |                                | •                |
| The street address changed will   | ess of its registe<br>be identical.                     | red office and                                   | i the street a                                 | address of t                                  | he business                                 | office of i            | ts register                          | ed ager                        | ıt,              |
| Such change wa<br>authorized by th  | as authorized by<br>ne board, or the                    | resolution decorporation h                       | uly adopted<br>as been no                      | l by its boar<br>tified in wr                 | rd of directo<br>iting of the o             | rs or by ar<br>change. | officer s                            | 0                              |                  |
| Signate   | se of an ornicer or dir                                 | ector)   | <del></del>                                    | _Timot  | hy J. Ta]<br>(Printed or ty                 | bot - I                | Preside:                             | nt                             | _                |
| I hereby accept<br>I further agree to<br>of my duties, an<br>document is bei<br>corporation has | to comply with t<br>ed I am familiar<br>no filed merely | he provisions<br>with and acc<br>to reflect a ci | s of all statt<br>ept the obli<br>hange in the | utes relative<br>igation of n<br>e registered | in ine prop                                 | er ana coi             | nplete per<br>d agent.<br>by confire | formai<br>Or, if t<br>n that t | ıce<br>his<br>he |
| T   |   | <del></del>                                      |  | 12.   | 10.2004                                     |                        |                                      |                                | _                |
| (SI)  | nature of Registered                                    |  | . <del></del>                                  | -   | (1  | Date)                  |                                      | . –                            |                  |
| If signing on be  | half of an entity                                       | <b>/</b> :                                       |  |   |   |                        |                                      |                                |                  |
|   | Typed or Printed Nam                                    | ie)  |  |   |   |                        | - <b>2</b> 57                        |                                |                  |
| ζ.  | . , , , , , , , , , , , , , , , , , , ,                 | -,   |  |   |   |                        |                                      |                                |                  |

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