

P97 000091569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

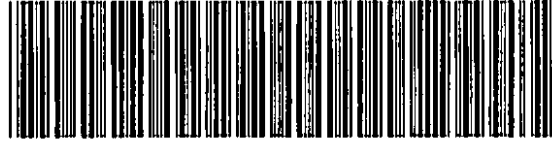
(Business Entity Name)

(Document Number)

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*RA Change
(office)*

REV 01 2022

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CLEAR WATER PRODUCTS & SERVICES INC.
Name of Corporation

DOCUMENT NUMBER: P97000091569

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:

JUDITH M CARNEY

Name of Contact Person

CLEAR WATER PRODUCTS & SERVICES INC

Firm/Company

P O BOX 196087

Address

WINTER SPRINGS FL 32719

City/State and Zip Code

clearwaterpsi@gmail.com

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

For further information concerning this matter, please call:

JUDITH CARNEY

Name of Contact Person

at (407)

3024455

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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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: CLEAR WATER PRODUCTS & SERVICES INC.

2. The principal office address: 251 S 3rd ST LAKE MARY FL 32746

3. The mailing address (if different): P O BOX 19087 WINTER SPRINGS FL 32719

4. Date of incorporation/qualification: 10/23 1997 Document number: P97000091569

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)

JUDITH M CARNEY
1544 SEMINOLA BLVD, SUITE #120
CASSELBERRY FL 32707

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

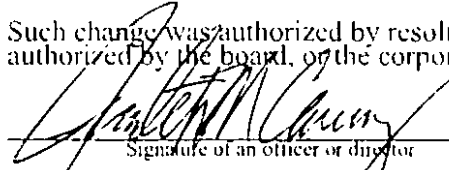
JUDITH M CARNEY
251 S 3rd ST
LAKE MARY FL 32746

P.O. Box NOT acceptable

2022 JUN 29 10:57

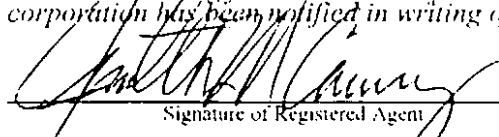
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

JUDITH M. CARNEY, PRESIDENT
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

7/26/2022
Date

If signing on behalf of an entity:
JUDITH M. CARNEY
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE