

P10000018507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP: WAIT MAIL

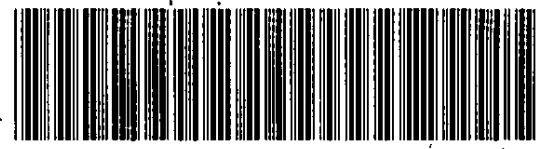
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
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@ 6/23/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Solar Lighting Corp
Name of Corporation

DOCUMENT NUMBER: Change of registered office and agent

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:

Lucia Mckercher
Name of Contact Person

Solar Lighting Corp
Firm/Company

9430 SW 49 Street
Address

Cooper City FL 33328
City/State and Zip Code

Lucia_menendez@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lucia Mckercher at (786) 3064571
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

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: Solar Lighting Corp
2. The principal office address: 17540 NW 49 Ave Miami Gardens FL 33055
3. The mailing address (if different): Same
4. Date of incorporation/qualification: March 2, 2010 Document number: P10000018507
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)

Lucia Menendez
17540 NW 49 Street
Miami Gardens FL 33055

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

Lucia Mckercher
9430 SW 49 Street
Cooper City FL 33328

P.O. Box NOT acceptable

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

Lucia Mckercher (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

06/14/2010
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 (8/05)

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