84000147955

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Dusings Fatts Name)			
(Business Entity Name)			
(Document Number)			
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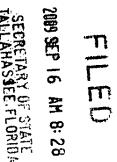
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AJR109

COVER LETTER

Amendment Section **Division of Corporations** FORTUNE Electrical Construction, Inc. SUBJECT: Name of Corporation P04000147955 **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: Michael E Holmes Name of Contact Person FORTUNE Electrical Construction, Inc. Firm/Company 17041 Alico Commerce Ct, Ste 1 Address Fort Myers FL 33967-8511 City/State and Zip Code mikeholmes@fortuneelectrical.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michael E Holmes 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 **Street Address:** Amendment Section **Division of Corporations Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

TO:

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flor unge is submitted for a corporation organized under the laws of the State er to change its registered office or registered agent, or both, in the State	of FLORIDA
	the corporation: FORTUNE Electrical Construction, Inc	
2. The principal	office address: 17041 Alico Commerce Ct Ste 1	<u></u>
Fort Myers	s FL 33967-8511	
3. The mailing a	address (if different):	
4. Date of incorp	rporation/qualification: 10/27/2004 Document number:	P04000147955
	d street address of the current registered agent and registered office on fil artment of State: (If resigned, enter resigned)	e with the
	Michael E Holmes	<u>.</u>
	11220 Metro Parkway Suite 17	
	Fort Myers FL 33966-1247	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registere	ms = -
	Michael E Holmes	8: 2: STATI STATI
	17041 Alico Commerce Ct Suite 1	0 0
	P.O. Box NOT acceptable	
	Fort Myers FL 33967-8511	
The street address changed will	ress of its registered office and the street address of the business office il be identical.	of its registered agent,
Such change wa author zed by th	vas authorized by resolution duly adopted by its board of directors or be the board, or the corporation has been notified in writing of the change	y an officer so
Signatur	Michael E I ure of an officer or director Printed or typed name	
Thereby accept I further agree to of my duties, an document is bei	It the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and am familiar with and accept the obligation of my position as regining filed merely to reflect a change in the registered office address, I have been notified in writing of this change.	d complete performance stered agent. Or, if this hereby confirm that the
1. Uhm	September 1	4, 2009
	gnature of Registered Agent Date chalf of an entity:	
	Michael E Holmes Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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