637845

| (Rec | questor's Name) | |
|---|-------------------|-------------------|
| (Ado | dress) | |
| (Add | dress) | |
| (City | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | siness Entity Nar | me) |
| , | · | · |
| (Dox | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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10/19/21--01022--014 **35.00

SECRETARY OF STATE

COVER LETTER

.

| TO: | Amendment Section Division of Corporations | |
|--------------|---|--|
| SUBJ Name | ECT: Energy Air Inc. of Corporation | |
| DOC | UMENT NUMBER: 637845 | |
| The er | nclosed Statement of Change of Registered | d Office/Agent and fee are submitted for filing. |
| Please | return all correspondence concerning this | s matter to the following: |
| Keith l | D. Daniels | |
| Name | of Contact Person | |
| Energy | y Air Inc. | |
| Firm/0 | Company | |
| 5401 1 | inergy Air Ct | |
| Addre | SS | |
| Orland | lo FL 32810 | |
| City/S | tate and Zip Code | |
| | keith@energyair.com | |
| E-mai | il address: (to be used for future annua | l report notification) |
| For fu | rther information concerning this matter, p | please call: |
| Keith l | D. Daniels | at (407)886-3729 Area Code & Daytime Telephone Number |
| | Name of Contact Person | Area Code & Daytime Telephone Number |
| Enclos | sed 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 |
| | 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 ch | nange is submitted for a corporation org | 9502, 607,1508, or 617,1508, Florida Statutes, this ganized under the laws of the State of Florida sistered agent, or both, in the State of Florida. | | |
|---|--|---|--|--|
| 1. The name of | The corporation: Energy Air Inc. | | | |
| 2. The principa | d office address: 5401 Energy Air Ct, Ori | lando Fl 32810 | | |
| 3. The mailing | address (if different): | | | |
| 4. Date of incorporation/qualification: 09/28/1979 Document number: 637845 | | | | |
| 5. The name an | | d agent and registered office on file with the | | |
| | Charles H. Kulp | | | |
| | 5401 Energy Air Ct | | | |
| | Orlando FL 32810 | · · · · · · · · · · · · · · · · · · · | | |
| 6. The name an (if changed): | | gent (if changed) and /or registered office Box NOT acceptable et address of the business office of its registered agent. | | |
| | 5401 Enegy Air Ct | | | |
| | P.O. Box NOT acceptable | | | |
| | Orlando FL 32810 | | | |
| The street address changed will | ess of its registered office and the stre l be identical. | et address of the business office of its registered agent, | | |
| Such change was authorized by the | as authorized by resolution duly adop he board, or the corporation has been | ted by its board of directors or by an officer so notified in writing of the change. | | |
| Xhnz | | John M. Bartkovich, President | | |
| Rignatu I hereby accept I further agree of my duties, an document is bei corporation has | the appointment as registered agent to comply with the provisions of all stand I am familiar with and accept the oing filed merely to reflect a change in seen notified in writing of this chang | Printed or typed name and title and agree to act in this capacity, attates relative to the proper and complete performance bligation of my position as registered agent. Or, if this the registered office address, I hereby confirm that the gc. | | |
| | | 10/12/21 | | |
| Sig | nature of Registered Agent | Date | | |
| | half of an entity: | | | |
| Keith D. Daniels | | | | |
| Ty | yped or Printed Name | | | |

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