To: Page 3 of 5 Division of Corporations			2016-05-25 16:52:36 EDT	43	5 From: CLS-FF Balti	more Fullfillmer
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COVER LETTER

TO: Amendment Section **Division of Corporations**

To:

Page 4 of 5

SOUTHERN ELECTRICAL SERVICES, INC. SUBJECT

(Name of Corporation)

DOCUMENT NUMBER: F00000004305

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following;

Theresa Alfieri

(Name of Person)

T CORPORATION SYSTEM

(Name of Firm/Company)

111 8th Avenue, 13th Floor

(Address)

New York, New York 10011

(City/State and Zip Code)

For further information concerning this matter, please call:

Theresa Alfieri

(Name of Person)

ു**894-851**6 Area Code & Davtime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address: Amendment Section Division of Corporations **Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

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Page 5 of 5 To:

2016-05-25 16:52:36 EDT

14105586265 From: CLS-FF Baltimore Fullfillment

DIVISION OF CORPORATION 16 MAY 25 AM 10: 02

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, CT CORPORATION SYSTEM (Name of Registered Agent)

hereby resigns as Registered Agent for SOUTHERN ELECTRICAL SERVICES, INC. (Name of Corporation)

F0000004305

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

(Signature of Resigning Agent)

If signing on behalf of an entity:

CT CORPORATION SYSTEM-Theresa Alfieri

(Typed or Printed Name)

ASSISTANT SECRETARY

(Capacity)

Fee for filing this document:

\$87.50 - Active Corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314