F02000003763

(Re	questor's Name)					
(Ad	dress)					
(Ad	dress)					
(Cit	y/State/Zip/Phone #)					
PICK-UP	WAIT MAIL					
(Bu	siness Entity Name)					
(Document Number)						
Certified Copies	Certificates of Status					
Special Instructions to	Filing Officer:					

Office Use Only



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12/29/14--01036--002 **35.00

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'JAN 0 8 2015 T. CARTER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard llockar2@cscinfo.com

Date: December 24, 2014

Order#: 432778-007

Re: SPEED WIRE INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Lockard c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	nge is submitted for a	a corporation organ	nized under the	617.1508, Florida Stat laws of the State of <u>Nev</u> ooth, in the State of Flor	w York	
1. The name of t	he corporation: SPE	ED WIRE INC.				
2. The principal	office address: 393 J	erico Turnpike, Sui	te 106, Mineola	, NY 11501		
3. The mailing a	ddress (if different):					
4. Date of incorp	oration/qualification	07/22/2002	Docume	nt number: F02000003	763	
	street address of the tment of State: (If re-	•	-	ered office on file with	the	
	Incorporating Service	ces, Ltd.				
	1540 Glenway Drive	е				7 .
	Mineola, NY 11501	I			4 DEC	NECRE
6. The name and (if changed):	street address of the	new registered age	nt (if changed)	and /or registered office	\sim	FILEC TARY OF TASSEE.
	Corporation Service	e Company			Ÿ	F ST/
	1201 Hays Street				2	ATE AIDA
	Tollahaaaaa	P.O. Box NO? FL	Γ acceptable	22204		
	Tallahassee			32301		
The street addre	ess of its registered of be identical.	ffice and the street	address of the	business office of its re	egistered	agent,
Such change was authorized by the	is authorized by resone board, or the corporate	olution duly adopted oration has been no	l by its board o tified in writing	f directors or by an offig of the change.	icer so	
Signatur	re of an officer or director		Alberto	de Cardena S	A55	st see
I further agree in performance of agent. Or, if this hereby confirm	my duties, and I am	rovisions of all stat familiar with and a filed merely to refl has been notified i	utes relative to accept the oblig	in this capacity, the proper and complete ation of my position as the registered office a schange.	s registere	ed
	nature of Registered Agent	()		Date	1	
If signing on be	half of an entity:)				
Grace E. Kirby,						
Ty	ped 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