F08000003283

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



200274570412

07/06/15--01045--008 **35.00



JUL 1 0 2015 C MCNAIR



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 lindsey.lockard@cscglobal.com

Date: June 29, 2015

Order#: 677281-003

Re: EVETS ELECTRIC, 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.

<u>XX</u> 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

15 JUL -6 PM 12: 09

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Floria a organized under the laws of the State o registered agent, or both, in the State o	of Ohio	
1. The name of the	he corporation: EVETS ELECTRI	C, INC.		
	office address:	4420		
3. The mailing a	ddress (if different):			
4. Date of incorp	oration/qualification: 07/24/2008	B Document number: F0800	00003283	
	street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file resigned)	with the	
	NRAI SERVICES, INC.		_ = =	
	1200 SOUTH PINE ISLAND RO	AD	55 U TRI	
	Plantation	FL 33324		
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office.			
	Corporation Service Company		_ 6% 5	
1201 Hays Street				
P.O. Box NOT acceptable				
	Tallahassee	FL 32301	_	
The street addre	ss of its registered office and the be identical.	street address of the business office of	f its registered agent,	
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has b	adopted by its board of directors or by a seen notified in writing of the change.	an officer so	
T		Dona Priebe, Vice President		
gnatu	re of an officer or director	Printed or typed name and	fitle	
I further agree to performance of agent. Or, if this hereby confirm	o comply with the provisions of a my duties, and I am familiar with	zent and agree to act in this capacity. all statutes relative to the proper and c h and accept the obligation of my posit to reflect a change in the registered of tified in writing of this change.	ion as registered	
By: X	nature of Registered Agent	06/24/2015		
-	half of an entity:	Date		
Grace E. Kirby,	Asst. Vice President			
Ty	ped or Printed Name	-		

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