F1400000 1521

(Re	equestor's Name)		
(Ac	ldress)		
(Ac	idress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
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Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglobal.com

Date: January 24, 2019

Order#: 597711-003

Re: NATIONWIDE POWER SOLUTIONS, 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: Ashley Seeman

c/o Corporation Service Company

251 Little Falls Drive 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.

OUCA.XCOA

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

statement of cha	nge is submitted for a corporation o	7,0502, 607,1508, or 617,1508, Florida organized under the laws of the State of registered agent, or both, in the State of	Nevada
 The name of t The principal 	the corporation: NATIONWIDE POV	WER SOLUTIONS, INC. T ROAD HENDERSON, NV 89074	
4. Date of incorp	poration/qualification: 04/03/2014	Document number: F14000	001521
	street address of the current registe tment of State: (If resigned, enter re	red agent and registered office on file visigned)	
	NRAI SERVICES, INC		2015
	1200 SOUTH PINE ISLAND ROAL	D	
	PLANTATION, FL 33324		2019 JAN 28
6. The name and (if changed):	street address of the new registered	l agent (if changed) and /or registered o	
	Corporation Service Company		. — _ ப்ப
	1201 Hays Street		
	P.O. Box Tallahassee, FL 32301	NOT acceptable	
The street addre	ss of its registered office and the st	reet address of the business office of it	ts registered agent,
1 1	. 11	opted by its board of directors or by an notified in writing of the change.	
		Julie Hallingstad, President	
I hereby accept I further agree to performance of t agent. Or, if this hereby confirm t	ny duties, and I am familiar with a	statutes relative to the proper and con nd accept the obligation of my position reflect a change in the registered offic	aplete a as registered
By: Drai	· Cotuble	01/21/2019	
sign If signing on beh	ature of Registered Agent alf of an entity:	Date	
	Asst. Vice President		
Туг	ped or Printed Name		

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