F21000002531

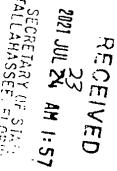
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TALL AND COME STATE



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 923284 8351411				
AUTHORIZATION: Sould Elema.				
COST LIMIT : \$ 3500				
ORDER DATE : July 22, 2021				
ORDER TIME : 10:21 AM				
ORDER NO. : 923284-005				
CUSTOMER NO: 8351411				
CHANGE OF AGENT				
NAME: LIGHTING MAINTENANCE INCORPORATED				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY				
XX PLAIN STAMPED COPY				
CONTACT PERSON: Eyliena Baker				
EXAMINER'S INITIALS.				

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 $^\circ$ organized under the laws of the State of $_$ registered agent, or both, in the State of F	MD
L. The name of	the corporation: LIGHTING MAINTE	ENANCE INCORPORATED	
		UE SUITE A LINTHICUM. MD 21090	
3. The mailing a	address (if different):		 ,
4. Date of incorp	poration/qualification: 05/06/2021	Document number: F210000	002531
	d street address of the current register rtment of State: (If resigned, enter re	ered agent and registered office on file wi	th the
	C T CORPORATION SYSTEM		
	1200 SOUTH PINE ISLAND ROA	AD	2021 JUL 23 SECRETARY
	PLANTATION	FL 33324	-t W. VE.LW -TOIL
6. The name and (if changed):	•	d agent (if changed) and /or registered off	
	Corporation Service Company		- Fig. 18
	1201 Hays Street		-
	Tallahassee	P.O. Box NOT acceptable FL 32301	_
The street addreas changed will	ess of its registered office and the s be identical.	street address of the business office of its	s registered agent.
Such change wa authorized by th	as authorized by resolution duly ad ne board, or the corporation has been	lopted by its board of directors or by an en notified in writing of the change.	officer so
<u> </u>	e & GOni	Jill Cilmi	Vice President
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered age to comply with the provisions of al ad I am familiar with and accept th ing filed merely to reflect a change s been notified in writing of this ch	Printed or typed name and to nt and agree to act in this capacity. I statutes relative to the proper and come e obligation of my position as registered in the registered office address. I hereb ange.	
Bv: Y)	n Service Company	07/22/2021	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity;		
Grace E. Kirby,	Asst. Vice President		
T	yped or Printed Name		

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