## F97403

| (Re                                     | equestor's Name)   |           |
|---|--------------------|-----------|
| (Ad                                     | dress)             |           |
| (Ad                                     | dress)             |           |
| (Cit                                    | ry/State/Zip/Phone | e #)      |
| PICK-UP                                 | WAIT               | MAIL      |
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October 20, 2006

RICHARD W. SMITH FISHER RUSHMER WERRENRATH DICKSON ETAL 20 NORTH ORANGE AVENUE, SUITE 1500 ORLANDO, FL 32801

SUBJECT: FLORIDA SOLAR DISTRIBUTORS, INC.

Ref. Number: F97403

We have received your document for FLORIDA SOLAR DISTRIBUTORS, INC. and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE ABOVE ENTITY IS A FLORIDA CORPORATION, NOT A LIMITED LIABILITY COMPANY. THE WRONG FORM HAS BEEN SUBMITTED.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Letter Number: 406A00062664

Karen Gibson
Document Specialist Supervisor

## **COVER LETTER**

| Division of Corporations  |
|---|
| SUBJECT: FLORIDA SOLAR DISTRIBUTORS, INC.  (Name of Limited Liability Company)  |
| Dear Sir or Madam:  |
| The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.   |
| Please return all correspondence concerning this matter to the following:   |
| Richard W. Smith  |
| (Name of Person)  |
| Fisher, Rushmer, Werrenrath, Dickson, Talley & Dunlap P.A.  (Firm/Company)  |
| 20 North Orange Aver Suité 1500 January Bank (1500)   |
| (Address)   |
| Orlando, FL. 32801  |
| (City/State and Zip Code)   |
| For further information concerning this matter, please call:  |
| Scott D. Kacic at (407 ) 323-2072 x 206   |
| (Name of Person) (Area Code & Daytime Telephone Number)   |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |
| Enclosed is a check for the following amount:   |
| \$25 Filing Fee \$\text{Certified Copy}\$   |

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

| statement of cha   | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.   |
|--|---|
| 1. The name of the                                       | he corporation: Florida Solar Distributors, Inc.  |
| 2. The principal   | office address: 691 Progress Way Sanford, FL. 32771   |
| 3. The mailing a   | ddress (if different):  |
| 4. Date of incorp  | poration/qualification: 8-23-1982 Document number: F97403   |
|  | street address of the current registered agent and registered office on file with the tment of State:   |
|  | Philip F. Keidaish, JR  |
|  | 320 W. Sabal Palm Place, Suite 200  |
|  | Longwood, FL. 32779   |
| 6. The name and (if changed):                            | street address of the new registered agent (if changed) and /or registered office   |
|  | Fisher, Rushmer, Werrenrath, Dickson, Talley & Dunlap P.A.  |
|  | 20 North Orange Ave. Suite 1500   |
|  | (P.O. Box NOT acceptable)  Orlando, FL. 32801   |
| The street addre   | ess of its registered office and the street address of the business office of its registered agent, be identical.   |
| Such change wa<br>authorized by th                       | as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.  |
|  | Scott D. Vacic  (Printed or typed name and title)   |
| I furthér agrée i<br>of my duties, an<br>document is bei | the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change. |
| <u> </u>   | end w State 12-11-06 gnature of Registered Agent) (Date)  |
| If signing on be   | Shalf of an entity:  1 W Sw - Richard W Smith  Typed or Printed Name)   |

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