HLA244

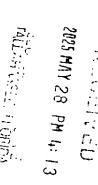
(Re	equestor's Name)	-			
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PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
<u> </u>	cument Number)	<u>. </u>			
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Tallhassee, FL 32301 Phone: 850-558-1500						
ACCOUNT NO. : 12000000195						
REFERENCE :						
AUTHORIZATION :						
COST LIMIT : \$35.0						
COST LIMIT : \$35.0 ORDER DATE : 05/28/25						
ORDER TIME :						
ORDER NO. :						
CUSTOMER NO:						
CHANGE OF AGENT						
NAME:						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY						

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

CONTACT PERSON: shauna godbolt

1201 Hays Street

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

statement of cha	mge is submitted for a cor	.0502, 617.0502, 607.1508, or 61 poration organized under the law office or registered agent, or both	vs of the State of FL			
1. The name of t	the corporation: NEXTERA	A ENERGY CAPITAL HOLDING	S, INC.			
2. The principal	office address: 700 UNIVE	ERSE BLVD JUNO BEACH, FL	33408			
3. The mailing a	ddress (if different):					
4. Date of incorp	poration/qualification: 08/	01/1985 Document n	number: H69244			
	I street address of the curre timent of State: (If resigne	ent registered agent and registered d, enter resigned)	d office on file with th	e		
	LEE, DAVID M			-2		
	700 UNIVERSE BLVD			H ezon		
	JUNO BEACH	FL	33408			
6. The name and (if changed):	I street address of the new Corporation Service Co	registered agent (if changed) and	l /or registered office	1025 HA: 28 PH 3: 07		
	1201 Hays Street					
	·					
	Tallahassee	FL	32301			
		and the street address of the bus in duly adopted by its board of d on has been notified in writing o				
authorized by the /s/Jason Pear	ie board, or the corporation	on has been notified in writing o Jason Pear		sst. Secretary		
	re of an officer or director		ed or typed name and title			
I further agree i of my duties, an document is bei	to comply with the provis ad I am familiar with and	tered agent and agree to act in t ions of all statutes relative to the accept the obligation of my posi a change in the registered office of this change.	e proper and complete ition as registered age	e performance ont. Or, if this ofirm that the		
Ву:		5/22/2025	Thus.			
If signing on be Shavna	half of an entity: GODDII Asst. Vice President		Date			

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