## LO8000078266

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



600185657176

10/04/10--01006--004 \*\*25.00

10 OCT -4 AH BY OL

D. BRUCE

OCT 5 2010

**EXAMINER** 

## **COVER LETTER**

10.	Division of Corporations						
SUBJ	JECT: H &	A Lighti	ng Service	es, LLC			
			Liability Con				
Dear	Sir or Madam:						
The e	nclosed Registered Agent/Registere	d Office C	hange and fee	e(s) are submitte	d for fili	ng.	
Please	e return all correspondence concerni	ng this ma	tter to the following	lowing:			
	Hayythem Mahmood  Name of Person	<u></u>		·			
	H & A Lighting Services, I	LLC					
	189 Angel Trumpet Wa Address	ny			SECRETAR FALLAHASS	10 OCT -4 AH M 04	en e
	Oveido, FL 32765 City/State and Zip Code				Y OF STATE SEE, FLORIDA	HAND	יח כ
	hannahanna add Obaliabii	!			DΑ	- Com-	
E	hmahmood4@halightingservi -mail address: (to be used for future annual repo	rt notification	1)				
For fu	orther information concerning this m	atter, plea	se call:				
	Hayythem Mahmood	at (	954)	812-02			_
	Name of Person		Area Cod	e & Daytime Telepho	ne Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registration Division of P.O. Box 63	Corporations			
	Enclosed is a check for the follow	wing amo	ınt:	-			
	\$25 Filing Fee		\$55 Filing	g Fee & Certified	d Copy		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agoin, or com, in the state of 1 tortal.						
Name of the limited liability company:	H & A Lighting Services, LLC					
2. (a) Principal office address of limited liability com	npany: 1600 E Vine St					
(Note: MUST BE STREET ADDRESS)	Suite F Kissimmee, FL 34744					
(b) Mailing address of limited liability company:	189 Angel Trumpet Way					
(Note: MAY BE POST OFFICE BOX)	Oveido, FL 32765					
August 14, 2008	L08000078266					
3. Date of filing/registration in Florida	4. Document number					
5. (a) Registered Agent and Registered Office shows	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
Registered Agent:	Hayythem Mahmood					
Registered Office Address:	3531 Merrick Lane Margate, FL 33063	77				
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:						
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	189 Angel Trumpet Way					
	Oveido ,FL32765					
If the limited liability company is not organized under confirmed that after the change or changes are made, t and the business office of the registered agent will be i liability company, it is hereby confirmed that the chan of the members of the limited liability company or as or the operating agreement of the limited liability com	the Florida street address of the registered officinentical. Or, in the case of a Florida limited age(s) was/were authorized by an affirmative vootherwise provided in the articles of organization	ote				
Signature of a member or authorized representative of a member						
Harthen Mahmon						
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of m Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability com	and agree to act in this capacity. I further agree the proper and complete performance of my duti- the position as registered agent as provided for a to merely reflect a change in the registered office inpany has been notified in writing of this chang	e to es, in ce e.				