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(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name) .	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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FILED 2009 SEP 25 PH 14: 32 SECRETARY OF STATE SECRETARSEE. FLORID

C. LEWIS

SEP 2 8 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	SMART ENERGY AMERICA, LLC
	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:
MARYBET \	ALLINA
Name of Per	on
. Firm/Compa	у
5121 SW 170	TH AVE
Address	
·	
. SOUTHWEST RANG	HES EL 33331
City/State and Zi	
marvbet@bel	south.net
marybet@bell E-mail address: (to be used for future	annual report notification)
For further information concern	ng this matter, please call:
MARYBET VALLIN	
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER AD	DRESS: MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Cir	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for	the following amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR SOTH 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.

*		
1. Name of the limited liability company:	SMART ENERGY AMERICA, LLC	
2. (a) Principal office address of limited liability	company: SMART ENERGY AMERICA, LLC	
(Note: MUST BE STREET ADDRESS	5121 SW 170TH AVE SOUTHWEST RANCHES, FL 33331	
(b) Mailing address of limited liability compa	my: SMART ENERGY AMERICA, LLC	
(Note: MAY BE POST OFFICE BOX)	5121 SW 170TH AVE SOUTHWEST RANCHES, FL 33331	
07/29/2009	L09000072697	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office s	shown on the records of the Florida Dept. of State:	
Registered Agent:	SARAH OLIVERA	
Registered Office Address:	5186 SW 172 AVE SOUTHWEST RANCHES FL 33331	
(b) Enter name of <u>NEW Registered Agent</u> a <u>NEW Registered Agent</u> :	nd/or NEW Registered Office address: MARYBET VALLINA	
NEW Registered Office Address:	5121 SW 170TH AVE	
MUST BE FLORIDA STREET ADDR.	SOUTHWEST RANCHES ,FL33331	
confirmed that after the change or changes are mand the business office of the registered agent will liability company, it is hereby confirmed that the	ander the laws of the State of Florida, it is hereby ade, the Florida street address of the registered office ll be identical. Or, in the case of a Florida limited change(s) was/were authorized by an affirmative vote or as otherwise provided in the articles of organization of company.	
MARYBET VALLINA Printed or typed name of signce		
I hereby accept the appointment as registered as comply with the provisions of all statutes relative and I am familiar with and accept the obligation. Chapter 608, F.S. Or, if this document is being address, I hereby confirm that the limited liability.	gent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, s of my position as registered agent as provided for in lied to merely reflect a change in the registered office y company has been notified in writing of this change.	
Signature of Registered Agent	- Argin in the second of the s	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		

INHS18 (05/08)