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To:	Division of Co	orporations : (850)617-6383	
	TOX HUMBET	. (030,017 0303	
From:			
		: REGISTERED AGENTS INC.	
	Account Number	: I20090000081	×. 0
	Phone	: (307)200-2803	2020
	Fax Number	: (855)330-1010	
			\$\$ 7
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## LIC REGISTERED AGENT CHANGE LIGHWA POWER, LLC

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	ante of the timited flatority company.	Power, LL	
2. (a)		(b) 411	Walnut Street
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	14501	1450	)1
	Green Cove Springs, FL 32043	Greer	1 Cove Springs, FL 32043
	09/24/12	L1200	00121898
3.	Date of filing/registration in Florida	4.	Document number
5. (a	TODEONIVA TEADANINALI		
.), (a	Registered Agent and Registered Office shown on the records	of the Florida Dept. of l	State:
	411 Walnut Street		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	<del></del>
	14501		
	Green Cove Springs	<sub>FL</sub> 32043	
		11,	7020
(b)	Registered Agents Inc.		
1 )	Enter name of NEW Registered Agent and/or NEW Registe	red Office address:	— SEP -
	7901 4th St N		<u>م</u>
	NEW Registered Office Address:		—
	STE 300		
	St. Petersburg	<sub>FL</sub> 33702	
the chagent was/w the ar	limited liability company is not organized under the range or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the lattice of a member or authorized representative of a member seby accept the appointment as registered agent and completely accept the appointment as registered agent and configutions of my position as registered agent as proveredly reflect a change in the registered office address, and in spritting of this change.	of the registered of Hiability company. is of the limited liable he limited liability.  Riley Park	it is hereby confirmed that the change(s) bility company or as otherwise provided in company.  Printed or typed name of signee

Division of Corporations• P.O. Box 6327• Tallahassec, FL 32314 F1LING FEE: \$25.00

- Assistant Secretary

Bill Havre

Signature of Registered Agent