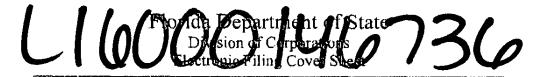
Division of Corporations

2016-09-07 22:50:22 GMT+1

13234467067 From: Imelda Vasquez Page 1 of 2



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000220790 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone Fax Number

: (323)962-8600 ; (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Tomas o	 N 41-4-4	

ġ,

LLC REGISTERED AGENT CHANGE SOLAR REVOLUTION CONTRACTORS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO:	Registration Section Division of Corporations		· · · · · · · · · · · · · · · · · · ·			
SUBJE	SOLAR REVOLUTION CONTRACTORS, LLC					
	Name of Limited Liability Company					
Dear S	ir or Madam;					
The end	closed Registered Agent/Registered Offic	ce Change and	fee(s) are submitted for filing.			
Please	return all correspondence concerning this	s matter to the f	following:			
Chey	enne Moseley					
	Name of Person		_			
Legal	zoom.com, Inc.	,				
	Firm/Company		 -			
101 N	l. Brand Blvd., 10th Floor					
	Address		~			
Glend	dale, CA 91203					
	City/State and Zip Code					
taylor	h19@hotmail.com					
E	-mail address: (to be used for future annu	ial report notific	cation)			
For fur	ther information concerning this matter,	please call:				
Cheye	enne Moseley	800 at (773-0888 ext 9724			
	Name of Person	(Area Code & Daytime Telephone Number			
Registration Section Registration of Corporations Division Building P.C.		AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, Florida 32314				
	□ \$25 Filing Fee	□ \$5:	5 Filing Fee & Certified Copy			
INHS18	(2/14)					

AUG/31/2016/WED 01:57 PM

FAX No.

P. 002

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.	. Name of the limited liability company: SOLAR REVOLUTION CONTRACTORS, LLC								
				(b)					
-	(4)	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)		Malling address of limited liability company: (Nate: MAY BE POST OFFICE BOX)					
		814 Hope Avenue			814 Hope Avenue			,-,	
	New Smyrna Beach, FL 32169 New Sm			New Smyrna Beac	nyrna Beach, FL 32169				
		08/05/2016		ı	16000146736				
3.		Date of filing/registration in Florida	4.	_	Document i	аптрег		······································	
5.	(a)								
	• •	Registered Agent and Registered Office shown on the records of	the Flor	ida	Dept. of State:			•	
		HILLIARD, TAYLOR			_	₩co			
		Registered Office Address OMUST BE FLORIDA STREET	IDDRE	(2,2)	···	لبقيا سنيا	o		
		814 HOPE AVENUE				골존	SEP	2 ±	
		NEW SMYRNA BEACH FL	3216	9		CRETARY OF STATE LAHASSEE FLORIO	က်	, ere	
						24°5 1710		. A ∏ p./`e7	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered				, T	77	. a.t.	
		Enter name of NEW Registered Agent and/or NEW Registered	Office	a <u>cid.</u>	(ues:	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ထဲ	A CONTRACTOR OF THE PARTY OF TH	
		United States Corporation Agents, Inc.				ASS ASS	2		
		NEW Registered Office Address:							
		13302 Winding Oak Court, Suite A							
		Tampa , FL	3361	2					
If the age	he li cha cut v s/we arti-	mited liability company is not organized under the lavinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liable authorized by an affiguative vote of the members of the organizative of the present of the	vs of the	no S	State of Florida, it is he	reby confirms liness office of firmed that the r as otherwise	d that the r chan provi	after egistered igo(s) ided in	
		1.12/1/2			Tay	lor Hilliard			
		nte of k member or authorized representative of a member	_			ed name of signe			
		by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I is I'm writing of this change.				rer agree to ca am familiar w this document ability compa	omply vith an t is be ny ha:	with the ad accept ing filed a been	
211	matu	e of Registered Agent Leheyanne Moseley, Authorized F	-						
		Division of Corporations + P.O. I	30x 63	27	Tallahassee, FL 323	14			

FILING FEE: \$25.00