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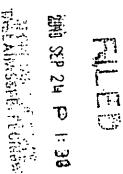
(Re	questor's Name)	
(Add	dress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to I	Filing Officer:	<u> </u>

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COVER LETTER

2 \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy				
Enclosed is a check for the follow	Enclosed is a check for the following amount:				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314				
Name of Person	Area Code & Daytime Telephone Number				
DOROTHY REED	941 623-3555				
For further information concerning this mat	ter, please call:				
E-mail address: (to be used for future	annual report notification)				
City/State and Zip Cod 4MAGNUM@COMCAST.NET	le				
PORT CHARLOTTE,FL 33948					
Address					
2074 WONDERWIN STREET					
Firm/Company					
MAGNUM ELECTRIC LLC					
Name of Person					
DOROTHY REED					
Please return all correspondence concerning	g this matter to the following:				
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.				
Dear Sir or Madam:					
2HK4-33E 0300	Name of Limited Liability Company				
MAGNUM ELECTRIC, L	LC				
Division of Corporations					

TO: Registration Section

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.

	MAGNUM EL	ECTRI	C LLC	
	ne of the limited liability company:	(p)	2074 WC	ONDERWIN STREET
!. (a) _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) PORT CHARLOTTE, FL 33948	_		ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) HARLOTTE, FL 33948
	1/24/2018	-	L1800002	
3. 5. (a)	Date of filing/registration in Florida DOROTHY REED	4.		Document number
). (a)	Registered Agent and Registered Office shown on the records of a 2074 WONDERWIN STREET PORT CHARLO		33 94 8 	
	Registered Office Address (MUST BE FLORIDA STREET & 2074 WONDERWIN STREET	<u>ADDRESS</u>	D 	
	PORT CHARLOTTE, FL	33948	3 	
(b)	DENNIS BERNACIAK	000		SP 21
	Enter name of NEW Registered Agent and/or NEW Registered 17352 ROBINSON AVE	Office ad	idress:	To G
	NEW Registered Office Address: 17352 ROBINSON AVE			ිද්දි සි
	PORT CHARLOTTE, FI	3394	8 	
Signal I here provis the obto men	dimited liability company is not organized under the later ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited learn authorized by an affirmative vote of the members icles of organization or the operating agreement of the atture of a member or authorized representative of a member and accept the appointment as registered agent and as it is a statute of my position as registered agent as providing a first a change in the registered office address. It is a frequency of this change.	iability of the line limited	company, it is nited liability con	s hereby confirmed that the change(s) y company or as otherwise provided in appany. Printed or typed name of signee

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