



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.

(((H090001707943)))



HDS0001707943ABC4

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)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

, ÷.

REGISTERED AGENT CHANGE

ENERGY TECHNOLOGIES GROUP, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$35.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

99-4104

7/27/2009

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.

| 1. Name of the limited liability company: | ENERGY TEC | HNOLOGIES GROUP, LL | .C ^f | | |
|--|---|---|--|-------------|--|
| 2. (a) Principal office address of limited I. (Note: MUST BE STREET ADD | iability company | | · | 1 | |
| (b) Mailing address of limited liability (Note: MAY BE POST OFFICE | company: <i>BOX</i>) | 400 ROUSER RD. BLDG, TWO, SUITE 204 CORAOPOLIS PA 15108 | | t) 11 | |
| 7/8/1999 3. Date of filing/registration in Florida | | <u>L99000004104</u> 4. Document number | | | |
| 5. (a) Registered Agent and Registered O | ffice shown on t | the records of the Florida De | ept. of State; | | |
| Registered Agent: | | A.G.C. CO. | SE SE | 2 2 | |
| Registered Office Address: | | 200 SOUTH ORANGE AS SUITE 2300 ORLANDO FL 32801 US | ASSE S | | |
| (b) Enter name of <u>NEW Registered As</u> | ent and/or NEV | | OF STA | | |
| NEW Registered Agent: | | C T Corporation System | ਨੂੰ ਜੋ - ੬ |)) | |
| NEW Registered Office Address: (MUST BE FLORIDA STREET A | DDRESS) | 1200 South Pine Island Road | | | |
| | _ | Plantation | n,FL 33324 | | |
| If the limited liability company is not organ that after the change or changes are made, to office of the registered agent will be identichereby confirmed that the change(s) was/wilability company or as otherwise provided limited liability company. (Signature of a member or authorized representative of a state of the change of the chan | the Florida street al. Or, in the cacere authorized being the articles of | t address of the registered of use of a Florida limited liabil y an affirmative vote of the | Hice and the busines lity company, it is members of the lim | ss iited | |
| (Printed or typed name of signee) | | • | | | |
| I hereby accept the appointment as register comply with the provisions of all statutes ream, familiar with and accept the obligations FS. Or, if this document is being filed to make the confirm that the limited liability company has the confirm that the limited liability company has the confirmation of Registored Agent) | red agent and as tative to the prosition is of my position is reflect a cas been not year. Special | gree to act in this capacity, per and complete performa as registered agent as provi hange in the registered offic donna Cudolhy Assistant Secretary | I further agree to noe of my dufles, an ded for in Chapter (se address, I hereby | d I 608, | |
| Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILTING FEE: \$25.00 | | | | | |

INHS18 (05/08)