

# M11000000668

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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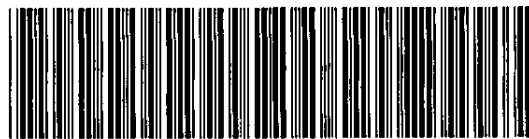
(Business Entity Name)

(Document Number)

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K. SATV  
EXAMINE  
JAN 28 2013



CORPORATION SERVICE COMPANY'

ACCOUNT NO. : I20000000195

REFERENCE : 495537 7474383

AUTHORIZATION :

COST LIMIT : \$ 25

*Lyndaleman*

ORDER DATE : January 14, 2013

ORDER TIME : 11:04 AM

ORDER NO. : 495537-015

CUSTOMER NO: 7474383

CHANGE OF AGENT

NAME: CONELEC OF FLORIDA, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Harry B. Davis

EXAMINER'S INITIALS: \_\_\_\_\_

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: CONELEC OF FLORIDA, LLC.

2. (a) Principal office address of limited liability company: 3045 Tech Park Way  
(Note: **MUST BE STREET ADDRESS**) Deland, FL 32724

(b) Mailing address of limited liability company: 3045 Tech Park Way  
(Note: **MAY BE POST OFFICE BOX**) Deland, FL 32724

02/02/2011

3. Date of filing/registration in Florida

M11000000668

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State

Registered Agent: C T Corporation System

Registered Office Address: 1200 South Pine Island Road  
Plantation, FL 33324

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent: Corporation Service Company


**NEW** Registered Office Address: 1201 Hays Street  
(**MUST BE FLORIDA STREET ADDRESS**) Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

  
(Signature of a member or authorized representative of a member)

Dona Priebe, Authorized Person  
(Printed or typed name of signer)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By:   
(Signature of Registered Agent)

Elizabeth A. Dawson, Asst. Vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00