## M15000002221

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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SPECE



September 14, 2016

## **VLA UPS**

Florida Department of State Registration Section Division of Corporation Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Change of Registered Agent

To Whom It May Concern:

Enclosed for filing, please find twenty-five (25) Registered Agent/Registered Office Change along with a check in the amount of \$625.00 to cover the filing fees.

Please return all correspondence concerning this matter to the following:

Amy Lowe, ACP
NextEra Energy Resources, LLC
700 Universe Blvd.
Juno Beach, FL 33408
Amy.Lowe@nee.com

Should you have any questions, please contact me at 561-691-7259.

Sincerely,

Amy Lowé, ACP

Senior Paralegal, Corporate Governance

Enclosures

## 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.

(a)		(b) _				
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	3/25/2015		E000003	004		
	Date of filing/registration in Florida		5000002			
	J.E. Leon	4.	Do	cument number	•	
(a)		C.(1 . C) (1 . C)				
	Registered Agent and Registered Office shown on the record	s of the Piorida Def	or state:			
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	<del></del>			
	4200 West Flagler Street, Suite 2123	<u> </u>				
	Miami	33134		$\mathbf{z}_{x}$	N.3	
	iviani,	, FL			2016	materia)
(b)	David Lee			\$	SEP	ATTECHES.
(0)	Enter name of NEW Registered Agent and/or NEW Register	ered Office address	<u></u>	SEE	5	ganterales
					U	
	NEW Registered Office Address:			SE	.; :	
	700 Universe Blvd.			DA.	4	
	Juno Beach	FL 33408				
					_	
	imited liability company is not organized under the inge or changes are made, the Florida street address					
nt v s/we	vill be identical. Or, in the case of a Florida limite are authorized by an affirmative vote of the membe cles of organization or the operating agreement of	d liability comparts of the limited	any, it is he Hiability co	reby confirmed ompany or as oth	that th	e change(s)
,	45		ott Seeley	-		
gnat	ture of a member or authorized representative of a member		Pri	nted or typed name	of signe	e

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent