## P01000049268

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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ELECTRIFIED SERVICES INC (Name of corporation)
DOCUMENT NUMBER: POLODOD 49268
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
GEORGE T. ARCHER (Name of person)
ELECTRIFIED SERVICE, INC. (Name of firm/company)
18455 MIRAMAR PARKWAY # 213
MIRAMAR FL 33029 (City/state and zip code)
For further information concerning this matter, please call:
GEORGE ARCHER at (954) 868 - 4014 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

CR2E045(07/02)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

this statement o	e provisions of se of change is submi	tted for a cor	poration organi	zed under the l	aws of the St	ate of
	in order to	change its r	egistered office	or registered a	agent, or bot	h, in the State
of Florida.	Nation	ELECT	RIFIED	SERVILE	raic.	
1. The name of	the corporation:_ l office address:	مصرم دوم			1100.	
2. The principa	l office address:	18425	MIRAMAR	. PKWY	# 2	13
-	HIRAMA	R, FL	- 330	29		9,0
3. The mailing	address (if differe	nt):			· · · · · · · · · · · · · · · · · · ·	<b>6</b> 200
4. Date of incom	rporation/qualifica	tion: MAY	16,2001	Document nur	nber: <u>PO</u> I	००००५ दिर्द
5. The name an	nd street address of artment of State:					
	EMILIO T	RODRIGUE	-2			
	8181 N	w 36 s	ST 43			
	MIAMI	FL :	33166			
6. The name a changed):	nd street address	of the new r	egistered agent	(if changed) a	_	ered office (if
	9E08GE 7					
	MIRAM	AR,	FL 33	029		
The street addragent, as chang	ress of its registere					its registered
PG	vas authorized by the board, or the c			s board of dire in writing of the Printed or typed har		
	r, chairman or vice chairm					
I further agree	t the appointment to comply with the f my duties, and I nt. Or, if this doc I hereby confirm	e provisions am familiar	of all statutes r	elative to the p t the obligation o reflect a chai n notified in w	roper and co of my positi nge in the re riting of this	on as
	Signarfire of Registered A	gent)		4/7/0 (Date)	<i></i>	<del></del>
If signing on beha						
	(Typed or Printed Name)		I ta	(Čapaci	ty)	

\* \* \* FILING FEE: \$35.00 \* \* \*