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(Re	equestor's Name)	····
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: X-treme Electric & AIR, Inc. (Name of Corporation)
DOCUMENT NUMBER: PO300051213
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:
Geri Calhoun (Name of Contact Person)
Y-treme Electric & AIR, Ix. (Firm/Company)
3306 Enterprise Road
Fort Pierce F1 34982 (City/State and Zip Code)
For further information concerning this matter, please call:
Ceri Cathoun at (772)344-9221 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State

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

Street Address: Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida.  in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: X-treme Electric FAIR, Inc.  2. The principal office address: 3306 Enterprise Drive Fort Pierre, F1. 349
3. The mailing address (if different):
4. Date of incorporation/qualification: 5/8/03 Document number: P630005/2/3
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  Scott Ceci  Leson NW Chiqurater Grade  Dt. St. Lucie, FL. 34983
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Scott (eu  3306 Enter prise Drive # 203 (P.O. Box NOT acceptable)  Fort Pierce, FL. 34982
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.    James   Canal   V.P.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:  (Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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