FILED Jan 17, 2008 8:00 am Secretary of State 01-17-2008 90023 014 ***150.00

| 2008 FOR PROFIT CORPORATIO | N |
|--|---|
| DOCUMENT # P0300058308 1. Entity Name SERVICE ELECTRIC LIMITED OF SOUTH FLORIDA, INC. | |

| 1. Entity Nam SERVICE | | RIC LIMITED OF S | SOUTH FLORIDA, IN | C. | | | | | | |
|--|-----------------------|--|---|--|-------------------------|---------------------------------------|---|---|---------|-------------------------|
| Principal Place of Business 4400 W. SAMPLE ROAD 236 COCONUT CREEK, FL 33073 US | | Mailing Address 1121 SE 15TH AVE DEERFIELD BEACH, FL 33441 US | | | 40005413 | | | | | |
| 2. Principal P | lace of Busin | ness - No P.O. Box # | 3 Mailing Address Q | 39 | | | | | | |
| Suite, Apt. | #, etc. | | Suite, Apt. #, etc. | | | 01092008 | Chg-P | CR2E034 (12 | /06) | |
| City & State | e | | Deerfield Be | | FL | 4. FEI Numb 11-369 | | | Not | olied For Applicable |
| Zip | | Country | 33443 | Country | ŠA | | of Status Desired | □ \$8.75 Fee Re | | |
| | b. Name | and Address of Current | Registered Agent | | Name | r, Name and | Address of New R | egistered Agent | | |
| BUSINESS FILINGS INCORPORATED 1203 GOVERNORS SQUARE BLVD SUITE 101 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| TALLAHASSEE, FL 32301-2960 | | | - | City | | | FL Zig | Code | | |
| 8. The above | named entit | y submits)this statement f | or the purpose of changing its | s registered | office or registe | ered agent, or bo | th, in the State of Flo | · - | with, a | ind accept |
| the obligat | tions of regis | ligh | Tand blie if applicable. (NO) | 15 D | | **** | | 1/14/0 | 8 | |
| | Comprature, type | or printed name (registered agen | and their applicable. (NO) | it. Registered / | Agant signature require | eu wrien reinstating) | | DATE | | |
| FIL After Ma | 5 NOW!!! ay 1, 200 | FEE IS \$156:00 8 Fee will be \$550. | 9. Election Campa Trust Fund Con | | | 5.00 May Be ded to Fees | | | | |
| 10. | Ь | OFFICERS AND | | 11. | <u> </u> | ADDITIONS | /CHANGES TO OFF | | | |
| NAME SIREET ADDRESS CITY - ST-ZIP | 1121 SE | KY, JAMES 15 AVE LD BCH, FL 33441 | ☐ Delete | TITLE NAME STREET CITY-S | (ADDRESS ST- ZIP | | | □ Ch | ange | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | □ Delete | HTLE NAME STREET CHY-S | r address st-zip | | | Ch | ange | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | □ Delete | HTLE NAME STREET CHY-S | I ADDRESS 31-21P | | | Cti | ange | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delele | THLE NAME STREET CITY-S | I ADDRESS | | | Ch | ange | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | THLE NAME STREET CHY-S | I ADDPESS S1-ZIP | | | Cr | ange | Addition |
| TITLE NAME. STREET ADDRESS CITY-SI-ZIP | | | ☐ Delete | CHY-S | | | | Cr | | Addition |
| 12. I hereby | certify that th | e information supplied will | In this filing does not qualify find that | or the exer | nptions containe | ad in Chapter 11 a same legal effe | 9, Florida Statutes. I ct as if made under | Flurther certify that oath: that I am an o | the in | ormation or director |

of the corporation or the receiver or trusfee sympowers tube and unacting signature shall have the same legal effect as it made under oath, that I am an officer or director of the corporation or the receiver or trusfee sympowers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with anyadoress, with all other like empowered.

SIGNATURE: _