

PO3000148833

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 205-0380

From:
Account Name : AFFORDABLE PROFESSIONAL SERVICES, INC.
Account Number : I20000000264
Phone : (954) 565-9929
Fax Number : (954) 565-1347

RECEIVED

03 DEC 22 AM 11:59
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 DEC 22 PM 4:21

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REGISTERED AGENT CHANGE

SOUTH FLORIDA LIGHTING & ELECTRICAL SERVICES, INC.

Certificate of Status	0
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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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: South Florida Lighting & Electrical Services, Inc.
2. The mailing address of the corporation is: 1801 SE 5th Court, Pompano Beach, FL 33060
3. Date of incorporation/qualification: Document number: P03000148833
4. The name and address of the current registered agent and office:
Patrick Thomas Doran
22800 Neptune Road
Boca Raton, FL 33428
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Perry Dean Murphy
1801 SE 5th Court
Pompano Beach, FL 33060

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.

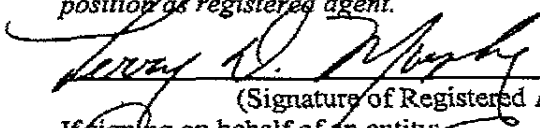

(Signature of an officer, chairman or vice chairman of the board)


(Date)

Perry Dean Murphy, Vice-President / Secretary

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 obligation of my position as registered agent.


(Signature of Registered Agent)


(Date)

If signing on behalf of an entity:

Perry Dean Murphy
(Typed or Printed Name)

VP / Sec/ Reg. Agent
(Capacity)

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

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DIVISION OF CORPORATIONS

P.O. BOX 6327

TALLAHASSEE, FL 32314

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