P0400001352

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
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COVER LETTER

TO: Amendm Division	ent Section of Corporations	
SUBJECT: So	plar Erectors U.S., Inc.	
SUBJECT:	(Name of Cor	poration)
DOCUMENT N	UMBER: P0400001352	
The enclosed Stat	tement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all o	correspondence concerning this matter t	o the following:
	Dante Rodriguez	
	(Name of Cont	act Person)
	Solar Erectors U.S	S., Inc.
	(Firm/Con	npany)
	10501 NW 121 W	'ay
	(Addre	·
	·	.55)
	Medley, FL 33178	
	(City/State and	Zip Code)
For further inform	mation concerning this matter, please ca	ıll:
Dante f	Rodriguez	at (305) 825-2514
1)	Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a \$35	5.00 check made payable to the Departn	nent of State.
	Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations
•	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
		Tallahassee, FL 32301

CR2E045 (8/05)

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

statement of change is submitted f	ions 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this for a corporation organized under the laws of the State of Florida gistered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation:	Solar Erectors U.S., Inc.	
2. The principal office address: 1	0501 NW 121 Way, Medley Florida 33178	
3. The mailing address (if differen	11):	
4. Date of incorporation/qualificat	tion: <u>12/22/2003</u> Document number: <u>P04000001352</u>	
5. The name and street address of Florida Department of State:	the current registered agent and registered office on file with the	
Richa	rd Burke	
1050	1 NW 121 Way	
Medl	ley, FL 33178	
(if changed);	the new registered agent (if changed) and /or registered office C T Corporation System C Corporation System, 1200 South Pine Island Road (P.O. Box NOT acceptable)	TALLAHASSE
	Plantation, Florida 33324	ور مربع
=	d office and the street address of the business office of its registered age	E, FLORIDA
such change was authorized by routhorized by the board, or the co	resolution duly adopted by its board of directors or by an officer so orporation has been notified in writing of the change.	
(Signature of an officer or direct	Richard Burke-VP/GM (Printed or typed name and fitte)	
hereby accent the appointment	as registered agent and agree to act in this vapacity, or provisions of all statutes relative to the proper and complete performance with and accept the obligation of my position as registered agent. Or, if this preflect a change in the registered office address, I hereby confirm that the writing of this change. Yellow	
f signing on behalf of an entity: Madonna Cud	dihy	
Special-Assistant-S		

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

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