## P0400010929

| (Requestor's Name)                      |
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| (City/State/Zip/Phone #)                |
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| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

December 7, 2011

THOMAS OLIVER A+ ENERGY INC 6461 NW 27TH ST MARGATE, FL 33063

SUBJECT: A+ ENERGY INC. Ref. Number: P04000010929

We have received your document for A+ ENERGY INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The new registered agent must sign document as registered agent accepting appointment which is Thomas E. Oliver.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 011A00027323

## **COVER LETTER**

| Division of Corpor          | rations   |
|-----------------------------|---|
| SUBJECT:                    | A+ Energy Inc.  Name of Corporation   |
|                             | Name of Corporation   |
| DOCUMENT NUMBER             | :P04000010929   |
|                             | Change of Registered Office/Agent and fee are submitted for filing.               |
| Please return all correspon | dence concerning this matter to the following:                                    |
|                             | ·   |
| •                           | Thomas Oliver   |
|                             | Name of Contact Person  |
|                             | A+ Energy Inc.  |
|                             | Firm/Company  |
|                             | 6461 NW 27th Street   |
|                             | Address   |
|                             | Margate, Florida 33063 City/State and Zip Code                                    |
|                             | City/State and Zip Code   |
| <del></del>                 | tomaenergy@aol.com address: (to be used for future annual report notification)    |
| E-mail                      | address: (to be used for future annual report notification)                       |
| For further information cor | ncerning this matter, please call:  |
| Thom                        | as Oiiver at ( 954 ) 328-4920  ontact Person Area Code & Daytime Telephone Number |
| Name of Co                  | ontact Person Area Code & Daytime Telephone Number                                |
| Enclosed is a \$35.00 check | made payable to the Department of State.  |
|                             |   |
| <u>M</u><br>At              | ailing Address: Street Address: mendment Section Amendment Section                |

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (8/05)

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

| statement of cha  | e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this sange is submitted for a corporation organized under the laws of the State of Florida ler to change its registered office or registered agent, or both, in the State of Florida.   |  |
|---|---|--|
| 1. The name of t  | the corporation: A+ Energy Inc.   |  |
|   | office address: 3181 S Ocean DC # 208W.   |  |
|   | allandale Bed, Fr. 33.007.  |  |
| 3. The mailing a  | address (if different):   |  |
| 4. Date of incorp   | rporation/qualification: 1/14/2004 Document number: P04000010929  |  |
|   | and street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)   | . n - 10 <sup>m</sup>  |
|   | Michael Dudash  | * **   |
|   | 3181 S. Ocean dr. 208W  | TI   |
|   | Hallandale Beach, FL. 33009   | The same of the sa |
| 6. The name and (if changed):   | and street address of the new registered agent (if changed) and /or registered office  Thomas Oliver  | · · · · · · · · · · · · · · · · · · ·  |
|   | 6461 NW 27th Street   |  |
|   | P.O. Box NOT acceptable   |  |
|   | Margate FL. 33063   |  |
| The street addre  | ress of its registered office and the street address of the business office of its registered agent, il be identical.   | ,  |
| Such change wa<br>authorized by th  | vas authorized by resolution duly adopted by its board of directors or by an officer so the board or the corporation has been notified in writing of the change.  |  |
| Molio Signatur  | are of an officer of director  Mi had tudes  Printed or typed name and title  | h  |
| I hereby accept I further agree t of my duties, an document is beit corporation has | t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performanc and familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change. | e<br>s<br>?  |
| Mon   | gnature of Registered Agent Date  |  |
| _   | ehalf of an entity:   |  |
| Thomas  | E OLive R   |  |

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