P06000079524

| (Re | equestor's Name) | | | | |
|---|--------------------|-------------|--|--|--|
| (Ad | dress) | | | | |
| (Ac | ldress) | | | | |
| (Cit | ty/State/Zip/Phone | e #) | | | |
| PICK-UP | ☐ WAIT | . MAIL | | | |
| · (Bu | siness Entity Nar | me) | | | |
| • | | | | | |
| (50 | cument Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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SECRETARY OF STATE

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COVER LETTER

| TO: Amendment Division of | Section Corporations |
|---------------------------|---|
| SUBJECT: | Orlando Energy, Inc. (Name of Corporation) |
| DOCUMENT NUM | 1BER: P06000079524 |
| The enclosed Statem | ent of Change of Registered Office/Agent and fee are submitted for filing. |
| Please return all corr | respondence concerning this matter to the following: |
| , <u> </u> | (Name of Contact Person) |
| / - | (Firm/Company) |
| | 400 S. Palmetta Ave. |
| / | (Address) |
| _ | Daytona Beach, FL. 32114 (City/State and Zip Code) |
| For further informati | on concerning this matter, please call: |
| | te of Contact Person) at (386) 252-3004 (Area Code & Daytime Telephone Number) |
| (Nam | (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

| statement of cha | ange is submitted for a c | 007.0302, 617.0302, 607. corporation organized un ed office or registered ag | der the laws of the | e State of <u>F</u> | hrida |
|--|--|---|---|---|--|
| 1. The name of | the corporation: | 0-12 | ndu Er | rergy, | Irc. |
| 2. The principal | office address: | 7235 Winter | Univers | :ty B | /wd. |
| | | | Perk, | Fc. | 32792 |
| 3. The mailing a | address (if different): | • • • | | <u>.</u> | |
| 4. Date of incorp | poration/qualification: | 6/9/06 | Ocument number: | P060 | 00079571 |
| | d street address of the cr rtment of State: | urrent registered agent an | d registered office | on file with th | ie |
| | A | hand, A | froo I | | |
| | フ | 235 Univ | ersity (| ?// . | |
| | <i>\</i> | vinter Park, | FC 3 | 32792 | 06 |
| 6. The name and (if changed): | d street address of the n | ew registered agent (if ch | anged) and /or reg | gistered of A | FILE Jun 23 |
| | | Frame D | . Mite | be 1) Ac | 是日 |
| | 400 | O. Box NOT acceptable) | ett A | <u>√e.</u> 🗟 | 2: 4í |
| | Dayt | 5, Palmo O. Box NOT acceptable) | 4, 1=c. | 32114 | |
| The street address changed will | ess of its registered off be identical. | ice and the street addres | s of the business | office of its re | gistered agent, |
| Such change wauthorized by | as authorized by resolu | ution duly adopted by its | board of director in writing of the c | rs or by an off change. | icer so |
| (H | tire of an officery director) | 1/ | Arous Al | | Pres/D |
| I hereby accept I further agree of my duties, ar document is be corporation ha | the appointment as re to comply with the pro nd I am familiar with a ing filed merely to refl s been nptified in writi | gistered agent and agre wisions of all statutes re ind accept the obligation ect a change in the regis ng of this change. | e to act in this ca, lative to the prop n of my position a stered office addre | pacity. er and comple s registered at ess, I hereby c I | te performance gent. Or, if this onfirm that the |
| (Si | ignature of Registered Agent) | | C/2 | 2 06 Date) | |
| | elalf of an entity: | | | | |
| | rose D. M. | Feler | | | |
| (| Typed or Printed Name) | | | | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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