P.01 11:21 vision of Corporations Page 1 of 1 ublic Access System

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(((H09000190508 3)))



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REGISTERED AGENT CHANGE

STH ELECTRICAL CONTRACTORS, INC.

Certificate of Status	0
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TATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the	provisions of secti	ions 607.0502, 6	517.0502, 6	07.1508, or 617.	1508, Florida Statute	ሄ,
this statement of	of change is submitte	•	-			
	in order to c	hange its registe	cred office o	or registered agei	nt, or both, in the Stat	:16
<i>of Florida.</i> L The name of	the corporation: S1	TH Electrical Contr	ractors. Inc.			₽
					CA 20002	
2. The principa	l office address: 69	of Peachtree mod	ustilai bivu.,	Ste. H, Norcross,	GA 3009Z	
3. The mailing	address (if different));)			
4. Date of incom	rporation/qualification	on: 12/5/2007		Document numbe	er: P07000129119	
	d street address of the street of State:	ne current registe	ered agent a	nd registered offic	ce on file with the	
	NRAI ŞERVICES,I	NC				200
	2731 EXECUTIVE	PARK DRIVE, SU	UITE 4		CRE	9 A (
	WESTIN FL 33331				RETARY	.009 AUG 28
6. The name a changed):	nd street address of		ered agent ((if changed) and	/or registered office (
	1203 Governors Sq	·			ATE A	2
	(P.O. Box or personal mailbox NOT acceptable) Tallahassee, FL 32301-2960					
The street addragent, as chang	ess of its registered sed will be identical	office and the st	treet addres	s of the business	office of its registered	d
Such change wanthorized by	as authorized by re- he board, or the cor	solution duly add poration has bee	opted by its on notified i	board of director in writing of the c	rs or by an officer so change.	
	r, Chairman or vice Chairman			Taylor, President (Printed or typed name an		
	t the appointment a to comply with the f my duties, and I ai nt. Or, if this docun I hereby confirm th	s registered uger provisions of all n familiar with a nent is being filed at the corporation	nt and agre l statutes re and accept ed merely to on has beer	e to act in this ca lative to the prop the obligation of reflect a change a notified in writin	pacity, er and complete my position as in the registered ng of this change.	
	Signature of Registered Agen	ft.		8/19/09		
If signing on boha		7		(c (Dail)		
Mark Williams	us mis unity;		AVP			
1	(Typed or Printed Name)			(Capacity)		

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

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

H090001905083