P09000009168

(Requestor's Name)	_
(Address)	_
(Address)	_
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Business Linuty Name)	
(Document Number)	
Certified Copies Certificates of Status	_
	7
Special Instructions to Filing Officer:	
	_

Office Use Only



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02/26/10-01026-019

SECRETARY OF STATE TALLAHASSEE, FLORID

FILED

RAChange Neuro 3-1-10

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

	provisions of sections 607.0502, 617.0502, 607.1508,			
	ange is submitted for a corporation organized under th			_
in orde	er to change its registered office or registered agent, or	r both, in the State	of Florida.	
1. The name of	the corporation: Turning Point Electric, Inc.	<u> </u>		
2. The principal	office address: 4527 Crescent Rd., Spring Hill	, FL 34606		
• •				
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 01/29/2009 Docum	ent number:	P0900009168	3Da
	d street address of the current registered agent and registerent of State: (If resigned, enter resigned)	stered office on file	e with the	
	Dawn R. Johnson			
	3419 Galt Ocean Drive, Suite A		2010 SEC	
	Ft. Lauderdale, FL 33309		O FEB	77
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered	FEB 26 P CRETARY OF LANASSEE. F	
•	Glendon K. Allen		12:	
•	4527 Crescent Rd.		ALEA TEA	
	P.O. Box NOT acceptable			
	Spring Hill, FL 34606		······	
The street addr as changed will	ess of its registered office and the street address of the identical.	ne business office	of its registered ag	gent,
Such change w authorized by t	as authorized by resolution duly adopted by its board he board, or the corporation has been notified in write	d of directors or b ting of the change	y an officer so	
Mo	ure of an officer or director GI	endon K. Allen		
I hereby accept I further agree of my duties, ar document is be	t the appointment as registered agent and agree to a to comply with the provisions of all statutes relative nd I am familiar with and accept the obligation of my ing filed merely to reflect a change in the registered s been notified in writing of this change.	ct in this capacity	<u>.</u>	ance f this t the
Dlu	1 / Glle	02/23/20)10	
Sig	gnature of Registered Agent	Date		
If signing on be	ehalf of an entity:			
7	l'yped or Printed Name			

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