## P22000083650

(Requestor's Name)				
(Address)				
(Address)				
(**\daile555)				
	. (C) (C)	. 40		
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
(50	,			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



200418719952 RA & RO change

11/15/28~-01014~-007 \*\*35.00

2023 NOV 15 AM 8: 34

A. RAMSEY DEC -11,2023

## **COVER LETTER**

Amendment Section

TO:

Division of Corporations		
Good Vibrations Electric, INC.  SUBJECT: Name of Corporation		
DOCUMENT NUMBER: P22(000083650		
The enclosed Statement of Change of Registered Office	ce/Agent and fo	ee are submitted for filing.
Please return all correspondence concerning this matter	er to the follow	ing:
Steven Robbins		
Name of Contact Person Good Vibrations Electric, INC.		
Firm/Company 2431 N. Westwood Dr.		
Address North Fort Myers, FL. 33917		
City/State and Zip Code Steven@GoodVibrationsElectric.com	m	
E-mail address: (to be used for future annual repo	ort notification	)
For further information concerning this matter, please	call:	
Steven Robbins	at (	544-7129
Name of Contact Person	Area C	ode & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Depa	rtment of State	
Mailing Address	Street Addre	·ss:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	inge is submitted for a corporation organ	12, 607,1508, or 617,1508, Florida Statutes, this nized under the laws of the State of Florida.  ered agent, or both, in the State of Florida.
1. The name of	Good Vibrations Electric, I	INC.
	2431 N. Westwood Dr. office address:	
North Fort Myer		
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification:	P22000083650  Document number:
	d street address of the current registered aptriment of State: (If resigned, enter resigne	ed)
	CORPORATION SERVICE COMPANY	
	1201 HAYS STREET TALLAHASSEE, FL 32301	
		**************************************
6. The name and (if changed):	d street address of the new registered ager	nt (if changed) and /or registered office
	Steven Robbins	
	2431 N. Westwood Dr.	
	P.O. Box North Fort Myers, FL. 33917	x NOT acceptable
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its registered age
Such change wauthorized by the	as authorized by resolution duly adopted he board, or the corporation has been no	d by its board of directors or by an officer so officed in writing of the change.
5	+ 1	Steven Robbins (Director)
	re of an otheer or director	Printed or typed name and title
I further agree of my duties, ar document is be	the appointment as registered agent and to comply with the provisions of all state and I am familiar with and accept the obling filed merely to reflect a change in this been notified in writing of this change.	utes relative to the proper and complete performa igation of my position as registered agent. Or, if i we registered office address, I hereby confirm that i
57		11/08/23
Sig	nature of Registered Agent	Date
If signing on be	chalf of an entity:	-1 . 1
Steven	Pobblis, Good Vi	ibrations Electric

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