

P930000086603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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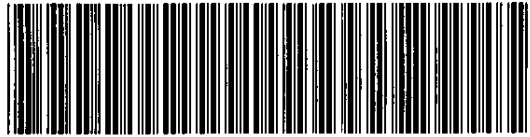
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: LIGHTING CONCEPTS AND SOLUTIONS, Inc.  
Name of Corporation

DOCUMENT NUMBER: P93000086603

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID BERNSTEIN

Name of Contact Person

LIGHTING CONCEPTS AND SOLUTIONS, INC.

Firm/Company

11711 NW 39 STREET

Address

CORAL SPRINGS, FL 33065

City/State and Zip Code

dbernstein@lightcs.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID BERNSTEIN

Name of Contact Person

at ( 954 ) 425-0123 ext 1108  
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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Lighting Concepts and Solutions, Inc.  
2. The principal office address: 11711 NW 39th Street  
Coral Springs, FL 33065  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 12/14/1993 Document number: P93000086603

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Gene Reibman  
7805 Southwest 6th Court  
Plantation, FL 33024

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Annie Pardo-Patten  
11711 NW 39th Street  
P.O. Box NOT acceptable  
Coral Springs, FL 33065

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
Signature of an officer or director

James L. Berger, CFO  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

[Signature]  
Signature of Registered Agent

6/16/2011  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

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