P94000000177

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I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Electric Company of South Florida, Inc

Name of Corporation

DOCUMENT NUMBER: P96000060177

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:

Kerlande Valbrun

Name of Contact Person

Electric Company of South Florida, Inc

Firm/Company

1451 W Cypress Creek Rd, Ste 300

Address

Fort Lauderdale, FL 33309

City/State and Zip Code

kelen@ecosf.net

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

For further information concerning this matter, please call:

Kerlande Valbrun

954 782-336

Name of Contact Person

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

•		2, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
-	• •	tion organized under the laws of the State of Florida or registered agent, or both, in the State of Florida.
	0 0 0	·
1. The name of	the corporation: LIECTIC CO	mpany of South Florida, Inc
2. The principa	office address: 1234 3VV 0	th Street, Pompano Beach, FL 33069
3. The mailing	address (if different):	
4. Date of incom	rporation/qualification: 7/18/1	1996 Document number: P96000060177
	nd street address of the current reartment of State: (If resigned, ent	gistered agent and registered office on file with the ter resigned)
	1234 SW 6th Street,	Pompano Beach, FL 33069
	<u> </u>	
6. The name an (if changed):	_	tered agent (if changed) and /or registered office Creek Road O. Box NOT acceptable
	1451 West Cypress (ن کے اور کا Creek Road
	Suite 300	
		ى O. Box NOT acceptable
	Fort Lauderdale, FL 3	
The street addr	ress of its registered office and to be identical.	he street address of the business office of its registered agent,
		y adopted by its board of directors or by an officer so seen notified in writing of the change.
		Glen Jordan, President
	ure of an officer or director	Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t the appointment as registered to comply with the provisions of my duties, and I am familiar wis document is being filed mere that the corporation has been	agent and agree to act in this capacity. If all statutes relative to the proper and complete ith and accept the obligation of my position as registered ly to reflect a change in the registered office address, I notified in writing of this change.
1/1	/4 _	06/18/2015
Sig	gnature of Registered Agent	Date
If signing on be	ehalf of an entity:	
Glen Jorda	an	
'i	yped or Printed Name	
	* * * FII	ING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314