

## P96000103952

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
| (Busiliess Enuty Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
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Office Use Only



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September 14, 2016

## VIA UPS

Florida Department of State Registration Section Division of Corporation Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Change of Registered Agent

To Whom It May Concern:

Enclosed for filing, please find twenty-two (22) Registered Agent/Registered Office Change along with a check in the amount of \$770.00 to cover the filing fees.

Please return all correspondence concerning this matter to the following:

Amy Lowe, ACP
NextEra Energy Resources, LLC
700 Universe Blvd.
Juno Beach, FL 33408
Amy.Lowe@nee.com

Should you have any questions, please contact me at 561-691-7259.

Sincerely,

Amy Lowe, ACP

Senior Paralegal, Corporate Governance

Enclosures

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

| statement of ch                     | e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nange is submitted for a corporation organized under the laws of the State of Florida   |   |
|-------------------------------------|--|---|
|                                     | ler to change its registered office or registered agent, or both, in the State of Florida.   |   |
| 1. The name of                      | f the corporation: ESI Vansycle GP, Inc.   | _ |
| 2. The principal                    | al office address: 700 Universe Blvd, Juno Beach, FL 33408   | _ |
|                                     | address (if different): 700 Universe Blvd, Attn: Corporate Governance  |   |
|                                     | Beach, FL, 33408   |   |
| 4. Date of incor                    | rporation/qualification: 12/26/1996 Document number: P96000103952  |   |
|                                     | nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)   |   |
|                                     | J. E. Leon   |   |
|                                     | 4200 West Flagler Street, Suite 2123   |   |
|                                     | Miami, FL 33134  |   |
| 6. The name and (if changed):       | Miami, FL 33134  Indicate address of the new registered agent (if changed) and /or registered office  David Lee  700 Universe Blvd  P.O. Box NOT acceptable  |   |
|                                     | David Lee  |   |
|                                     | 700 Universe Blvd  | • |
|                                     | ·  |   |
|                                     | Juno Beach, FL 33408   |   |
| The street addreas changed will     | ress of its registered office and the street address of the business office of its registered agent, l be identical.   |   |
| Such change wa<br>authorized by the | vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.  |   |
|                                     | W. Scott Seeley, Asst. Secretary   |   |
| I hereby accept                     | t the appointment as registered agent and agree to act in this capacity.  to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as registered his document is being filed merely to reflect a change in the registered office address, I at that the corporation has been notified in writing of this change. |   |
| 400                                 | Sept. 6, 2016  |   |
|                                     | granie of regulated r.Bom  |   |
| If signing on be                    | ehalf of an entity:  |   |
| Т                                   | Typed or Printed Name  * * * FILING FEE: \$35.00 * * *   |   |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314