P98000081456

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: South Florida Hood & Electric Corp. Name of Corporation			
DOCUMENT NUMBER: P98 0000 91456			
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:			
Name of Contact Person Comman Celles Tain Name of Contact Person Comman Celles South Florida Houd of EleaPire Firm/Company 1421 River LAND RD Address Fort Landendale, FL 33312 City/State and Zip Code SPE Hood C Ya how Com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (786) 251-8538 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 Street Address: Amendment Section Division of Corporations Clifton Building			

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of change is submitted for a corporation organized under the laws of the State of
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: South Florida Hood & Electric Corp.
2. The principal office address: 14ZI RIVERLAND ROAD
FORT LAUdendale, FL 33312
3. The mailing address (if different):
4. Date of incorporation/qualification: 09/21/1998 Document number: P98000081456
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)
1421 RIVERDAND ROAD
FORT LOUDENDAND ROAD
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Davie, Flori LA 33317
Davie Flori da 33317
P.O. Box NOT acceptable
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.
Gignature of an officer or director OMAR Celes TRIM 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.
Oma Culcy 05/20/13 Signature of Registered Agent Date
If signing on behalf of an entity:
OMAR CelesTrise 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
CR2E045 (03/12)