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COVER LETTER

TO: Amendment Section of Corporation of Corporation (Corporation)	ion orations						
SUBJECT:	Universal Electrical	Services, Inc.					
	Name of Co	prporation					
DOCUMENT NUMBER	≀:P990	000012481					
The enclosed Statement o	f Change of Registered Office	/Agent and fee are submitted	for filing.				
Please return all correspon	ndence concerning this matter	to the following:					
•		C					
	Dennis F	ontaine					
Dennis Fontaine Name of Contact Person							
Universal Electrical Services, Inc.							
Firm/Company							
	1540 NW 6	5 Avenue					
	Addr						
Additss							
Plantation, FL 33313 City/State and Zip Code							
City/State and Zip Code							
	dennis@ue	sinc.net					
E-mail address: (to be used for future annual report notification)							
For further information co	oncerning this matter, please ca	all:					
Denni	is Fontaine	_at (954)	658-9214				
	Contact Person	_ at (<u>954</u>) Area Code & Daytime '	Telephone Number				
Enclosed is a \$35.00 chec	ck made payable to the Departi	ment of State.					
<u> </u>	Mailing Address:	Street Address:					
•	Amendment Section Division of Corporations	Amendment Section Division of Corpo					
	P.O. Box 6327	Clifton Building	Tanons				
	Fallahassee, FL 32314	2661 Executive C	enter Circle				
	,	Tallahassee, FL 3					

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

statement of cha	mge is submitted for a co	orporation organized	507.1508, or 617.1508, Floi d under the laws of the State d agent, or both, in the State	_{e of} <u>Florida</u>
1. The name of	the corporation: Unive	rsal Electrical	Services, Inc.	
2. The principal	office address: 1540 N	IW 65 Avenue, I	Plantation, FL 33313	
3. The mailing a	address (if different): Sa	me		
	poration/qualification:		Document number:	
	d street address of the current of State: (If resign		nt and registered office on fi	le with the LAHA
	Dennis Fontaine			రుచ్ డి I ణ
	11651 NW 18 Cou	ırt		2 A
	Plantation, FL 333			AM IO: 09
6. The name and (if changed):	d street address of the ne	w registered agent (if changed) and /or registere	ed office
	Dennis Fontaine	· · · · · · · · · · · · · · · · · · ·		
	1540 NW 65 Aven			
	Diametra El 222	P.O. Box NOT ac	cceptable	
		ce and the street ad	dress of the business office	
Such change wauthorized by t	as authorized by resolut he board; or the corpora	tion duly adopted bution has been notif	y its board of directors or lied in writing of the chang	by an officer so e.
Signati	are of an officer or director		Dennis Fontain Printed or typed nam	
I hereby accept I further agree of my duties, a document is be corporation ha	t the appointment as reg to comply with the prov nd I am familiar with ar ing filed merely to refle is been notified in writin	ristered agent and a visions of all statute id accept the obliga ct a change in the r ig of this change.	agree to act in this capacit es relative to the proper an ation of my position as reg registered office address, I	y d complete performance istered agent. Or, if this hereby confirm that the
<u>\$</u>	gnature of Registered Agent		01-28-2 Date	010
If signing on be	ehalf of an entity:	•	·	·
	Dennis Fontaine Typed or Printed Name			

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