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ŝ **COVER LETTER** TO: Amendment Section **Division of Corporations** Wiz Electric CORP Name of Corporation SUBJECT: DOCUMENT NUMBER: <u>P 99000056919</u> 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: Olf. 8181 -11 -State and Z (to be used for future annual report notification)

For further information concerning this matter, please call:

<u>305) 888-5954</u> rea Code & Davtime Telephone Number at ( Name of Contact Person

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

CR2E045 (03/12)

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

I. The name of the corporation: RUIZ ELECTRIC CORP
2. The principal office address: <b>PIPI</b> NU 91 TR UNTY
MEDLEY, FLORIDA
3. The mailing address (if different):
4. Date of incorporation/qualification: JUNE 23, 1999 Document number: P99000056919
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)
Ruiz, NABCISO R
8181 NW 9, TERRACE UNIT 4
MEDLEY, FL 33166
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
MARCEL RUIZ
8181 NW 91 FERRACE UNITY P.O. BOX NOT acceptable
MEDLEY, FL 33166
/ The start address of its accietant of the and the start to idea an of the basic start of the start to access

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.

NARCISO PUIZ

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 comparation has been notified in writing of this change.

ignature of Registered Agent

nature of an officer or direct

If signing on behalf of an entity:

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)