507781

(Requestor's Name)		
(Address)	_	
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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DIVISION OF SAME OF STATES.

DEC 53 SUR

COVER LETTER

	nent Section n of Corporations		
SUBJECT:	All States Lighting Name of Corpo	g Inc oration	
DOCUMENT N	NUMBER: 5 Ø 7781		
The enclosed Sta	atement of Change of Registered Office/A	gent and fee are submitted for filing.	
Please return all	correspondence concerning this matter to	the following:	
	Diana Blaney Name of Contac	et Person	
	All States light	haq	
	3780 Silver Star R	રેતું .	
	Orlando F 32 City/State and 2		
	_		
ASLORIANDOQ hellsouth. net			
	E-mail address: (to be used for futu	re annual report notification)	
	rmation concerning this matter, please call	;	
Dia	Name of Contact Person	at (407) 254-0404 Area Code & Daytime Telephone Number	
]	Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$3	5.00 check made payable to the Departme	ent 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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: All States Lighting, Inc.
2. The principal office address: 3780 Silver Star Rd.
Orlando, Fr 32808
3. The mailing address (if different):
4. Date of incorporation/qualification: $\frac{ \upsilon 15 90}{}$ Document number: $\frac{S \phi 7781}{}$
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)
CLAIRE NARDONE
3780 SILVER STAR Rd.
ONLANDO, FZ 32808
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
JEFFREY RENZULLI
P.O. Box NOT acceptable
ORUNDO, E 32808
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.
Urange Diane N. Blancy - General Manager 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.
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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