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| (Addre: | 55) | |
| (City/S | tate/Zip/Phone | e #) |
| PICK-UP | | MAIL |
| (Busine | ess Entity Nar | ne) |
| (Docur | nent Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Fili | ng Officer: | |
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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

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TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: December 5, 2018

Order#: 497154-110

Re: MEI ELECTRICAL, INC.

Enclosed please find:

 \underline{XX} Change of Registered Agent and Office. \underline{XX} Check in the amount of \$35.

Please take the following action:

<u>XX</u> File in your office on a routine basis.
<u>XX</u> Issue Proof of Filing.
<u>XX</u> Please return evidence to the following:

Attn: Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX ____ Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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 Louisiana ________ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: <u>MEI ELECTRICAL</u>, INC.

2. The principal office address: 17723 Airline Highway, Prairieville, LA 70769

3. The mailing address (if different): P.O. Box 77810, Baton Rouge, LA 70879

| 4. Date of incorporation/qualification: | 06/05/2002 | Document number: F0200002854 | |
|---|------------|------------------------------|--|
|---|------------|------------------------------|--|

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)

| | C T Corporation System | | | | | 201 | | |
|-------------------------------|-----------------------------|----------------------------|---------|------------------|------------|----------|----------------------------|----|
| | 1200 South Pine Island F | Road | | | | 2018 DEC | | ۹. |
| | Plantation, FL 33324 | _ | | | SVH | r-7 | r is two Autorius IJ | : |
| 6. The name and (if changed): | l street address of the new | registered agent (if chang | ged) ar | nd /or registere | ed officer | PH 4:3 | \mathbf{O} | |
| | Corporation Service Con | ipany | | | بي س | 5 | | |
| | 1201 Hays Street | | | | | | | |
| | P.O. Box NOT acceptable | | | | | | | |
| | Tallahassee | | FL | 32301 | | | | |

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.

ner enature

Jill Cilmi, Vice President Printed of 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. Corporation Service Company

By Signature of Registered Agent

12/04/2018

Date

If signing on behalf of an entity:

Ami M. Casper, Asst. Vice President

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)