## F95000002010

(F	Requestor's Name)
(A	(ddress)
(A	ddress)
(C	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	Business Entity Name)
(Ĉ	Oocument Number)
,	,
Certified Copies	Certificates of Status
Special Instructions to F	iling Officer:
	J. HORNE
	J. HORNE OCT 13 2022

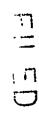
Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 989797 8392490 AUTHORIZATION COST LIMIT ORDER DATE: October 4, 2022 ORDER TIME : 9:49 AM ORDER NO. : 989797-253 CUSTOMER NO: 8392490 CHANGE OF AGENT NAME: STURGEON ELECTRIC COMPANY, INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_ CERTIFIED COPY XX \_ PLAIN STAMPED COPY CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS:

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

statement of cha	nge is submitted	ctions 607.0502, 617.050. If for a corporation organ registered office or registe	ized under the la	ws of the State of_	Michigan	
•	-	-	_	•		
The name of the corporation: STURGEON ELECTRIC COMPANY, INC.  2. The principal office address: 12150 E. 112th Avenue, Henderson, CO 80640						
3. The mailing a	ddress (if differ	ent):		<u> </u>		
4. Date of incorp	oration/qualific	eation: 04/08/1998	Document	number: F98000	002010	
5. The name and	street address of	of the current registered ag (If resigned, enter resigne	•	ed office on file w	ith the	
	C T Corporation	on System			_	
	1200 South Pine Island Road					
	Plantation		FL	33324		
6. The name and (if changed):	street address of	of the new registered agen	t (if changed) and	d /or registered of	2022 OCT 12 AM 10: SECRETARY OF FALLAHASSEE, FIA	
	Corporation S	ervice Company			- 芸	
	1201 Hays Str	reet				
		P.O. Box	NOT acceptable		三三	
	Tallahassee		FL_	32301	– ් <b>ර</b> 7	
The street addre as changed will	ss of its registe be identical.	red office and the street a	address of the bu	siness office of it	s registered agent,	
Such change wa authorized by th	s authorized by e board, or the	resolution duly adopted corporation has been not	by its board of o	directors or by an of the change.	officer so	
Xie	2 GC	) mil	Jill Cilmi, Vice	President		
Signatur	e of an officer or dire	ector	Print	ed or typed name and ti	fle	
l further agrée t of my duties, and document is beir corporation has	o comply with t d I am familiar ng filed merely	it as registered agent and the provisions of all statu with and accept the oblit to reflect a change in the n writing of this change.	l agree to act in tes relative to th gation of my pos registered offic	this capacity. e proper and con ition as registeres e address, I hereb	nplete performance A agent. Or, if this by confirm that the	
ву:	en M.	Léy	10/11/2022			
Sign	ature of Registered	Agent		Date		
If signing on bel	nalf of an entity	<i>:</i> :				
Ami M. Casper,	Asst. Vice Pres	sident				
Ty	ped or Printed Name	<del></del>				

\* \* \* 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 (04/13)