.F0000005646

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
	v/State/7in/Phone			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
	siness Entity Nam			
(bu	siness Entity Nam	ie)		
(Do	cument Number)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
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TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: Ameresco, Inc.	corporation)
(Albito of	
DOCUMENT NUMBER: F00000005646	<u> </u>
The enclosed Statement of Change of Registered Office/A	igent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
	-
Suzanne Cryan	
	f person)
Bay State Corporate Services, Inc.	
(Name of fir	m/company)
6 Beacon St., Ste 510	lress)
(Auc	u c55)
B MA 00100	
Boston, MA 02108 (City/state a	nd zip code)
For further information concerning this matter, please call	•
To reaction and and and anticomplete control	•
Suzanne Cryan	ot (617) 742-8484
(Name of person)	at (617) 742-8484 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Departme	ent of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	409 E. Gaines Street
Tallahassee, FL 32314	Tallahassee, FL 32399

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

change is submi	provisions of sections 607.0502, 617.0502 tted for a corporation organized under th gistered office or registered agent, or both	e laws of the State of Delaware	i, this states	ment of _in orde	
	the corporation: Ameresco, Inc.	i, milie State of Florida.			
	office address: 111 Speen Street, Ste 4	110			-
	m MA 01701				_
					_
4. Date of incorp	poration/qualification: 10/04/2000	Document number:F00000005646	<u> </u>		_
	street address of the current registered ag trnent of State:	gent and registered office on file with the			
	CT Corporation System				
	1200 South Pine Island Road		_		
	Plantation FL 33324		– TÄÜ	05	
6. The name and (if changed):	street address of the new registered agent	t (if changed) and /or registered office	LAHASS	05 NOV -8	7
	NRAI Services, Inc.		_ ru². ∭-∵	A	П
	2731 Executive Park Drive, Suite 4		ST.	တ္	C
	(P.O. Box or personal m	utilbox NOT acceptable)	- REC	2	
	Weston, FL 33331		→		
The street addre	ss of its registered office and the street a identical.	address of the business office of its regist	ered ag e nt	., as	
Such change wa the board, or the	s authorized by resolution duly adopted corporation has been notified in writing	by its board of directors or by an officer g of the change.	so authori	zed by	
	David J. Corrsin, Secretary & Exec. VP			-	
auues, ana 1 am being filed mere been notified in	familiar with and accept the obligation by to reflect a change in the registered of writing of this change.	l agree to act in this capacity, tes relative to the proper and complete p of my position as registered agent. Or, i ffice address, I hereby confirm that the c		e of my iment is i has	ř
NRAI Services, by:	Inc. Unru / Signature of Registered Agent)	7/11/205			_
f signing on bel	ι) / (Dute)			
Suzanne Cryan		Asst. Secretary			
	(Typed or Printed Name)	(Capacity)			•

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