

F0200000000035

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**REGISTERED AGENT CHANGE
CAROLINA POWER & LIGHT COMPANY**

Certificate of Status	0
Certified Copy	0
Page Count	03
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RA/RO/CHS
@ 10/31/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CAROLINA POWER & LIGHT COMPANY

Name of Corporation

DOCUMENT NUMBER: F02000000035

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:

Nancy M. Wright

Name of Contact Person

Duke Energy Corporation

Firm/Company

550 S. Tryon Street DE045A

Address

Charlotte, NC 28202

City/State and Zip Code

nancy.wright@duke-energy.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nancy M. Wright

704 382-9151

Name of Contact Person

at ()
Area Code & Daytime Telephone Number

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

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

- 1. The name of the corporation: CAROLINA POWER & LIGHT COMPANY
2. The principal office address: 410 S. WILMINGTON STREET, PEB 17B5 RALEIGH NC 27601
3. The mailing address (if different):

4. Date of incorporation/qualification: 01/03/2002 Document number: F02000000035

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)

Corporation Service Company
1201 Hays Street
Tallahassee FL 32301-2525

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System
o/o C T Corporation System, 1200 South Pine Island Road Plantation,
P.O. Box NOT acceptable
Florida 33324

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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.

Nancy M. Wright, Assistant Secretary
Signature of an officer or director 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.

By: C T Corporation System
Signature of Registered Agent Date 10/30/12

If signing on behalf of an entity:
Ternell Kearner, Asst. Secretary
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

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