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Corporation Guarantee and Trust Company

TWO GREENWOOD SQUARE, SUITE 110 3331 STREET ROAD, BENSALEM, PA 19020 TELEPHONES: (800) 563-6131 * (215) 633-8144 FAX (215) 633-8160

June 22, 2004

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

RE: NEW ACCESS COMMUNICATIONS LLC

To Whom It May Concern:

Enclosed is duplicate Change of Registered Agent/Office of the above company for filing with your office, together with our \$25.00 check to cover filing fee.

Please send your usual acknowledgment and receipt to this office when the filing has been completed. Thank you.

Cordially yours,

Teresa Magee

Secretary

TM/t Enclosures

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SECRETATE TALLAHASSEE ELOBIATE

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the limited liability company is: NEW ACCESS COMMUNICATIONS LLC 2. The mailing address of the limited liability company is: 801 Nicollet Mall, Minneapolis, MN September 7, 2000 M00000001817 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: TCS CORPORATE SERVICES. INC. Name 1406 Hays Street, Suite 2 Address FL 32301 City, State and Zip <u>Tallahassee FL</u> 6. The name and address of the new registered agent and/or office: Edwin F. Blanton Name 825 Thomasville Road Florida street address (P.O. Box NOT acceptable) <u>Tallahaşşee</u> City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member of authorized representative of a member) Yresdent. (Printed or typed name of signee) 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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

(Signature of Registered Agent)

FILING FEE: \$25.00

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(Signature of Registered Agent)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.