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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 : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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TALLAHASSEE, FLORIDA
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**REGISTERED AGENT CHANGE
COMPANIA CUBANA DE ELECTRICIDAD**

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| Certificate of Status | 0 |
| Certified Copy | 0 |
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****PLEASE RESUBMIT AND GIVE ORIGINAL SUBMISSION DATE AS THE FILE DATE.



November 24, 2009

FLORIDA DEPARTMENT OF STATE

Division of Corporations

COMPANIA CUBANA DE ELECTRICIDAD
263 SHUMAN BLVD.
ATTN: LEGAL DEPT., 5TH FLOOR
NAPERVILLE, IL 60563US

SUBJECT: COMPANIA CUBANA DE ELECTRICIDAD
REF: 115899

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

PLEASE LIST THE CROSS REFERENCE NAME AS WELL.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

FAX Aud. #: H09000245926
Letter Number: 309A00036373

RECEIVED
2009 NOV 24 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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

1. The name of the corporation: Compania Cubana de Electricidad , Cuban Electric Company
2. The principal office address: 263 Shuman Boulevard, Attn: Legal Dept., 5th Floor, Naperville, IL 60563
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/13/1927 Document number: 115899
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T Corporation System1200 South Pine Island RoadPlantation, FL 33324

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

Corporation Service Company1201 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.

Maureen Cullen
(Signature of an officer or director)

Maureen Cullen, Attorney in Fact(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.

Corporation Service CompanyBy: Sylvia Queppet(Signature of Registered Agent)November 17, 2009(Date)

If signing on behalf of an entity:

Sylvia Queppet, Asst. VP(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 (8/05)

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