## 19879 **Document Number Only**

CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 Tel 850 222 1092 Fax 850 222 7615 Attn: Jeff Netherton

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CORPORATION(S) NAME

Conus Communications Company Limited Partnership

		TACE 00	
( ) Profit ( ) Nonprofit	() Amendment	() Mergers St	
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark FOR M	
() Limited Partnership () LLC	<ul><li>( ) Annual Report</li><li>( ) Name Registration</li><li>( ) Fictitious Name</li></ul>	() Other	
() Certified Copy	() Photocopies	()CUS	JAH
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up	JAM 14 PH 1: 24
Name Availability Document Examiner	01/14/00	• • •	ATTONS
Updater Verifier Acknowledgement W.P. Verifier	BK	- - · · ·	
		14/00	

## Florida Department of State, Jim Smith, Secretary of State

## LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership organized under the laws of the state of Minnesota \_\_, 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 pa	artnership is:		9
Conus Communications Compa	•	ship	8
2. The date of filing/registration	on in Florida:		HAN
<u>May 8, 1985</u>	-	 	THE CALL
3. Document number assigne	d:		THE CORPORATIONS
A19879	·	· · · · · · ·	
4. The name and address of	the present registered	d agent and office:	24 10
George E. Ogera			35
14375 Meyerlake Circle	··· ··		
Clearwater, FL 33760	· · · · · · · · · · · · · · · · · · ·	- 7	
5. The name and address of t	the successor register	red agent and office .:	
(P.O. E	Box not Acceptable)	Ŭ	
	C T CORPORATION SY	YSTEM	
c/o C T Corp	oration System 120	0 South Pine Island R	
	<u>12021011 Dyscemy 120</u>	Jo Souch Fine Iszand R	
	Plantation, Flori	<u>da 33324</u>	- <u>·</u> · · ·
Such change was authorized t	by the general partne	S. By: Hubbard Broadc	asting, Inc.
		row to bleeve	
	Date: <u>12/9/99</u>	General Partner Gerald	D. Deeney,
			<u>esident and Treasure</u>
HAVING BEEN NAMED AS RE PROCESS FOR THE ABOVE S NATED IN THIS CERTIFICATE	STATED LIMITED PAI	RTNERSHIP AT THE PL	ACE DESIG-
REGISTERED AGENT AND AG	REE TO ACT IN THI	S CAPACITY.   FURTHE	RAGREE
TO COMPLY WITH THE PROV	'ISIONS OF ALL STA'	TUTES RELATIVE TO T	HE PROPER
ND COMPLETE PERFORMAN	NCE OF MY DUTIES, F MY POSITION AS F	AND I AM FAMILIAR WI	TH AND
		T CORPORATION SYSTEM	1
	SIGNATURE:	( h.	
		(Officer)	
	CONNIC BI	MAN, Spend Jost. Se	<u>.</u>
	1. 27	Name and Title of Officer)	q ·····
	Date:/ -///-/	///	
Division of Corporat	ions, P.O. Box 6	327, Tallahassee, Fl Filing Fee:	L 32314