

A32451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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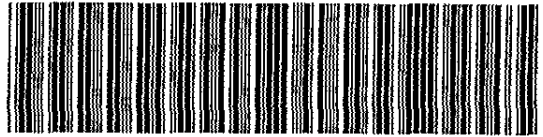
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 180857 4379392

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : July 24, 2003

ORDER TIME : 10:36 AM

ORDER NO. : 180857-010

CUSTOMER NO: 4379392

CUSTOMER: Manuel Mangrobang
Calpine Corporation
6th Floor
50 West San Fernando
San Jose, CA 95113

CHANGE OF AGENT

NAME: AUBURNDALE POWER PARTNERS,
LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CONTACT PERSON: Troy Todd

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OF CALIFORNIA
SAN JOSE

**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 submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. AUBURNDALE POWER PARTNERS, LIMITED PARTNERSHIP
Name of the limited partnership

2. 01/13/1992
Date of filing/registration in Florida

3. A32451
Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

NRAI Services, Inc.
Name

526 East Park Avenue
Address

Tallahassee, FL 32301
City, State and Zip

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STATE
TALLAHASSEE, FLORIDA

5. The name and address of the new registered agent and/or office:

Corporation Service Company
Name

1201 Hays Street
Florida street address (P.O. Box **not** acceptable)

Tallahassee FL 32301
City, State and Zip

6. Such change(s) was/were authorized by the general partners.

Blanca Lozada
Signature of General Partner

Blanca Lozada, Attorney in Fact

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Corporation Service Company

Sylvia Queppet
Signature of Registered Agent Sylvia Queppet, Asst. Vice President

**Make checks payable to Florida Department of State and mail to:
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00**