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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : URS AGENTS LLC
Account Number : 120150000127
Phone : (800)567-4397
Fax Number : (800)567-4398

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

Email Address: rhenderson@urscompliance.com

REGISTERED AGENT CHANGE

NATIONAL RURAL TELECOMMUNICATIONS COOPERATIVE

INC.

Certificate of Status	0
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COVER LETTER

TO: Amendment Section Division of Corporations		
NATIONAL RURAL TELECOMMUNICATIONS COOPERATIVE, INC.		
SUBJECT: Name of Corporation		
DOCUMENT NUMBER: F0000002160		
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:		
Scott Garey		
Name of Contact Person		
NATIONAL RURAL TELECOMMUNICATIONS COOPERATIVE, INC.		
Firm/Company		
2121 COOPERATIVE WAY, SUITE 600		
Address		
HERNDON, VA 20171		
City/State and Zip Code		
rhenderson@urscompliance.com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Kathy Clark Name of Contact Person Name of Contact Person Name Ode & Daytime Telephone Number		
Name of Contact Person 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)

CR2E045 (03/12)

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0 statement of change is submitted for a corporation or	ganized under the laws of the State of DC
	gistered agent, or both, in the State of Florida.
1. The name of the corporation: NATIONAL RURA	AL TELECOMMUNICATIONS COOPERATIVE, INC
2. The principal office address: 2121 COOPERA	ATIVE WAY, SUITE 600 HERNDON, VA 20171
3. The mailing address (if different): 2121 COOPE	ERATIVE WAY, SUITE 600 HERNDON, VA 20171
4. Date of incorporation/qualification: 04/19/2000	0
5. The name and street address of the current registers Florida Department of State: (If resigned, enter resi	
NRAI SERVICES, INC.	
1200 SOUTH PINE ISLAN	ID ROAD
PLANTATION, FL 33324	
6. The name and street address of the new registered (if changed):	agent (if changed) and /or registered office
URS AGENTS, LLC	
3458 LAKESHORE DRIVE	
	NOT acceptable
TALLAHASSEE, FL 32312	2
The street address of its registered office and the streas changed will be identical.	eet address of the business office of its registered agent,
Such change was authorized by resolution duly ador authorized by the board, or the corporation has been	pted by its board of directors or by an officer so inotified in writing of the change.
Janu Hilmoro	Terry Gilmore, CFO
I hereby occept the appointment as registered agent I further agree to comply with the provisions of all sperformance of my duties, and I am familiar with an agent. Or, if this document is being filed merely to hereby confirm that the corporation has been notified.	Printed or typed name and bits t and agree to act in this capacity, statutes relative to the proper and complete and accept the obligation of my position as registered reflect a change in the registered office address, I ed in writing of this change.
Signature of Registered Agent	9.16-19 Date
If signing on behalf of an entity:	
Kathy Clark, Assistant Secretary Typed or Printed Name	
* * * FILING	PEE: S35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314