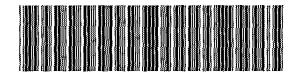
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ACCOUNT NO. : 072100000032

REFERENCE: 830199 7157369

AUTHORIZATION

ORDER DATE: November 21, 2002

ORDER TIME : 3:05 PM

ORDER NO. : 830199-095

CUSTOMER NO: 7157369

CUSTOMER: Leticica Magana

Quanta Services, Inc. 1360 Post Oak Blvd

Suite 2100

Houston, TX 77056

CHANGE OF AGENT

NAME: HAINES CONSTRUCTION COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

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

Pursuant to th	he provisions of sections 607.0502,	617.0502, 607	7.1508, or 617.1508	8, Florida Statutes,		
this statement	of change is submitted for a corpora	ation organized	under the laws of t	he State of		
Delaware	in order to change its regis	stered office or	registered agent, o	or both, in the State		
of Florida.			. •	• •		
1. The name o	f the corporation: HAINES CONSTRUCT	TION COMPANY	<del></del>	- E 2		
2. The principa	al office address: 4616 Oil Patch	Drive		TO NOT THE		
Woodward,	OK 73801			FINANCE PROPERTY OF THE PROPER		
3. The mailing	address (if different):	<u> </u>		ED PH		
4. Date of inco	orporation/qualification: April 20,	2000 Do	ocument number: F	000000002200 00		
	nd street address of the current regist artment of State:	tered agent and	registered office or	ı file with the		
	Capitol Corporate Service, Inc	<del>.</del>		<del></del> -	_	
	1333 North Duval Street					
	Tallahassee, FL 32303					
6. The name a changed):	and street address of the new regist	tered agent (if	changed) and /or r	egistered office (if		
	Corporation Service Company			<del></del> .		
	1201 Hays Street (P.O. Box or personal n	nailbox NOT acceptal	ole)	· v. 1		
	Tallahassee, FL 32301					
The street addragent, as chang	ress of its registered office and the s ged will be identical.	street address o	f the business offic	e of its registered		
Such change wanthorized by	vas authorized by resolution duly ad the board, or the corporation has be	lopted by its bo en notified in v	eard of directors or vriting of the chang	by an officer so ge.		
Signature of an office	er, chairman or vice chairman of the board)		nlap, Attorney in Med of typed name and title)			
I further agree performance of registered age office address, corporation s	t the appointment as registered age to comply with the provisions of all f my duties, and I am familiar with the Or, if this document is being file I hereby confirm that the corporation of the Company	l statutes relati and accept the ed merely to re ion has been no	o act in this capacitive to the proper ail obligation of my perfect a change in the otified in writing of the object.  (Date)	ty. id complete osition as e registered this change.		
	Signature of Registered Agent)	<del>,</del>	(Date)	<del></del>	••	
If signing on beha	A 1 1		t			
	Keplogle (Typed or Printed Name)	As age	(Capacity)	<del></del>		

\* \* \* FILING FEE: \$35.00 \* \* \*