FC1000001339

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	÷#)
—		—
☐ PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filina Officer:	
'	J	i

Office Use Only



400265719234

10/27/14--01020--028 **35.00

SEURETARY OF STATE FALLAHASSEE, FLORIDA

14 OCT 27 AH 12: 28



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith jsmith2@cscinfo.com

Date: October 23, 2014

Order#: 338426-071

Re: UTILITY SERVICE COMMUNICATIONS CO., INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

•	•	617.0502, 607.1508, or 617.1508, Florida Statutes		
		on organized under the laws of the State of Georgi		
in order	r to change its registered office of	or registered agent, or both, in the State of Florida.		
1. The name of t	he corporation: UTILITY SERVI	CE COMMUNICATIONS CO., INC.		
2. The principal	office address: 535 Courtney Ho	odges Boulevard, Perry, GA 31069		
			·	
3. The mailing a	ddress (if different): P. O. Box 1	350, Perry, GA 31069	<u> </u>	
4. Date of incorp	poration/qualification: 03/09/20	Document number: F01000001339		
	street address of the current reg tment of State: (If resigned, enter	gistered agent and registered office on file with the er resigned)		
	NRAI Services, Inc.			
	1200 South Pine Island Road			
	Plantation, FL 33324		SECRETAR'	
6. The name and (if changed):	street address of the new registered agent (if changed) and for registered office		27 AH ARY OF ASSEE, F	
	Corporation Service Company		AH I2: 2 Of Stat E, flori	
	1201 Hays Street		DE: 00	
P.O. Box NOT acceptable				
	Tallahassee	32301		
The street addre	ss of its registered office and the identical.	ne street address of the business office of its regist	ered agent,	
Such change wa authorized by th	s authorized by resolution duly e board, or the corporation has	adopted by its board of directors or by an officer been notified in writing of the change.	so	
0260	Dona Priebe, Vice President			
Signatur	e of an officer or director	Printed or typed name and title		
I further agree to performance of agent. Or, if this hereby confirm to	o comply with the provisions of my duties, and I am familiar wi s document is being filed merel	agent and agree to act in this capacity. I all statutes relative to the proper and complete I and accept the obligation of my position as reg I to reflect a change in the registered office addr I to to writing of this change.	zistered ess, I	
<u> </u>	er t-Kuby	October 20, 2014		
Sign	nature of Registered Agent	Date		
If signing on bel	half of an entity:			
Grace E. Kirby,	Assistant VP			
Ty	ped or Printed Name	_		

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