

F01000004500

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CORPORATION SERVICE COMPANY'

ACCOUNT NO. : 072100000032

REFERENCE : 087352 7292798

AUTHORIZATION :

COST LIMIT :

\$ *Patricia Pajut*

ORDER DATE : December 15, 2004

ORDER TIME : 10:33 AM

ORDER NO. : 087352-310

CUSTOMER NO: 7292798

CUSTOMER: Ms. Zoe Alexander
Broadwing Communications , Llc
1122 Capital Texas Highway
South
Austin, TX 78746

CHANGE OF AGENT

NAME: FOCAL FINANCIAL SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Haddan

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FOCAL FINANCIAL SERVICES, INC.
2. The principal office address: Suite 1100, 200 North LaSalle Street
Chicago, IL 60601
3. The mailing address (if different): _____
4. Date of incorporation/qualification: August 24, 2001 Document number: F01000004500
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T Corporation System

1200 South Pine Island Road

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

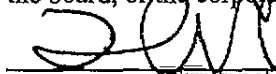
1201 Hays Street

(P.O. Box or personal mailbox NOT acceptable)

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



(Signature of an officer or director)

David Mace Roberts, Vice President

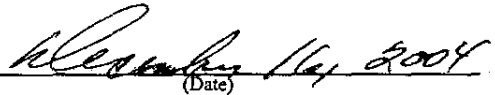
(Printed or typed name and title)

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 obligation 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 corporation has been notified in writing of this change.

Corporation Service Company



(Signature of Registered Agent)



(Date)

If signing on behalf of an entity:

Marva Williams

(Typed or Printed Name)

Assistant Vice President

(Capacity)

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

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

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