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| Special Instructions to I | Filing Officer. | |
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Office Use Only



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ALLAdASsec - Long

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 644233 7176279

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: September 16, 2024

ORDER TIME : 10:18 AM

ORDER NO. : 644233-004

CUSTOMER NO: 7176279

CHANGE OF AGENT

NAME: ALLETE, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller

EXAMINER'S INITIALS: _____

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

| statement of cha | nge is submitted for a corporation | of 7,0302, 607,1308, or 617,1308, Florida . n organized under the laws of the State of _ r registered agent, or both, in the State of F | MN | |
|--|---|---|---|--|
| The name of t The principal | he corporation: ALLETE, INC. office address: 30 W. Superior St | treet Duluth, MN 55802 | | |
| 3. The mailing a | ddress (if different): | *** | | |
| 4. Date of incorp | oration/qualification: 04/14/200 | Document number: F06000 | 002407 | |
| | street address of the current regi- tment of State: (If resigned, enter | stered agent and registered office on file wiresigned) | ith the | |
| | C T Corporation System | | _ | |
| 1200 South Pine Island Road, Broward County | | | | |
| | Plantation | FL 33324 | 2021 SE(| |
| 6. The name and (if changed): | red agent (if changed) and /or registered of | 2021, SEP 21, FAITH 10 SECRETALLE | | |
| | Corporation Service Company | | _ 🔆 🖫 | |
| | 1201 Hays Street | | | |
| | | P.O. Box NOT acceptable | 7 7 7 6 | |
| | Tallahassee | FL 32301 | _ | |
| The street addre as changed will | ss of its registered office and the be identical. | e street address of the business office of it | s registered agent, | |
| Such change wa authorized by th | s authorized by resolution duly e board, or the corporation has l | adopted by its board of directors or by an been notified in writing of the change. | officer so | |
| /s/Julie L. Padilla | | Julie L. Padilla, VP Chief Legal Offic | er & Corp.Secretary | |
| Signatur | e of an officer or director | Printed or typed name and to | īle | |
| I further agree to of my duties, an document is being corporation has | the appointment as registered a ocomply with the provisions of d I am familiar with and accepting filed merely to reflect a chanbeen notified in writing of this in Service Company | gent and agree to act in this capacity. all statutes relative to the proper and con the obligation of my position as registere ge in the registered office address, I herei change. | uplete performance d agent. Or, if this by confirm that the | |
| By: Drace 2-Kuby 09/23/2024 | | 09/23/2024 | | |
| | nature of Registered Agent | Date | | |
| If signing on be | half of an entity: | | | |
| | Asst. Vice President | _ | | |
| Ty | ped or Printed Name | | | |
| | * * * F[L] | ING FEE: \$35.00 * * * | | |

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