

REFERENCE : 736090

AUTHORIZATION

COST LIMIT : \$ 35.00

ORDER DATE: June 19, 2000

ORDER TIME : 9:44 AM

ORDER NO. : 736090-050

CUSTOMER NO: __ 7210194

CUSTOMER: Ms. Kim Adamson

Firstworld Communications, 8390 East Crescent Parkway

#300

Englewood, CO 80111

CHANGE OF AGENT

NAME:

FIRSTWORLD COMMUNICATIONS,

INC.

200003322922

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Mimi Stephens

TALL AHASSEE, FI CRIDA DIVISION OF CORPORATIONS DEPARTMENT OF STATE

L4 :01 WY 1 705 00

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

	provisions of sections 607.0502, 617.0502, 66	
	corporation organized under the laws of the Sta owing statement in order to change its registere	
the State of Flor		
1. The name of the corporation is: Firstworld Communications, Inc.		
	•	
2. The mailing	address of the corporation is:	
7100 East	Belleview Avenue, Ste. 300, Greenwood Vil	ilage, CO 80111
3. Date of inco	rporation/qualification: 8/14/98	Document number: F980000002542
4. The name an	nd address of the current registered agent and offi	ice:
	NRAI Services, Inc.	
	526 E. Park Avenue	3 5
	Tallahassee, FL 32301	
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)		
	Corporation Service Company	
	1201 Hays Street	\$\frac{1}{2}
	Tallahassee, Florida 32301	≥
agent, as chang	ress of its registered office and the street addre- ted, will be identical.	
Such change wauthorized by t	he board.	s board of directors or by an officer so
Ma	4	6/13/00
Signatu	re of an officer, chairman or vice chairman of the board)	(Date)
Jeffrey L. Dy	kes, Secretary	
	(Printed or typed name and title)	
corporation, I	amed as registered agent and to accept service of hereby accept the appointment as registered age to comply with the provisions of all statutes relaying from and I am familiar with and accept the new control of the c	nt and agree to act in this capacity. tive to the proper and complete
By: 2	Meler (Mir)	7/14/00
	(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:		
Karen Harri	.S (Typed or Printed Name)	Asst. V.P. (Capacity)
	(1) how or remined remine)	· •

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