F99000002626

| (Reque | stor's Name) | |
|-------------------------------|---------------|-------------|
| | | |
| (Addre | ss) | |
| | | |
| (Addre | ss) | |
| | | |
| (City/S | tate/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL |
| | | |
| (Busine | ess Entity Na | me) |
| | | |
| (Docun | nent Number) |) |
| | | |
| Certified Copies | Certificate | s of Status |
| | | |
| Special Instructions to Filir | ng Officer: | |
| | | |
| | | ľ |
| | | |
| | | |
| | | |
| | | |
| <u> </u> | | <u></u> |

Office Use Only



100017794781

05/08/03--01063--027 **35.00

O3 MAY -8 PA 1: 18

2003 MAY -8 PM 3: 21

CT CORPORATION

May 8, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5830379 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Paetec Capital Corp. (DE)
Change of Agent
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley_Mitchell@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

FILED

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, It the undersigned corporation organized under the laws of the State of Delaware submits the following statement in order to change its registered office or registered at the State of Florida. | |
|---|--|
| 1. The name of the corporation : Paetec Capital Corp. | |
| 2. The mailing address of the corporation : One Paetec Plaza, 600 Willowbrook Office Park, Fa | airport, NY 14450 |
| 3. Date of incorporation/qualification: 5/21/1999 Document number: F | 99000002626 |
| 4. The name and address of the current registered agent and office: | 2003 |
| HIQ Corporate Services, Inc. | 13 HAY |
| 526 East Park Avenue - Suite 200 | A. T |
| Tallahassee, FL 32301 | 88 |
| 5. The name and address of the new registered agent (if changed) and/or registered office (P. O. Box Not Acceptable) | e (if changed): 3: 28 |
| C T Corporation System c/o C T Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324 | <u>.</u> |
| The street address of its registered office and the street address of the business office agent, as changed, will be identical. | of its registered |
| Such change was authorized by resolution duly adopted by its board of directors or by authorized by the board. | an officer so |
| Rupaid attaloguna 4/21/0 | 3 |
| (Signature of an officer, chairman or vice chairman of the board) (Date) RICHALO DITALAGAMA (Printed or typed name and title) | |
| Having been named as registered agent and to accept service of process for the above corporation, I hereby accept the appointment as registered agent and agree to act in a I further agree to comply with the provisions of all statutes relative to the proper and performance of my duties, and I am familiar with and accept the obligation of my post registered agent. CT Corporation System | e stated this capacity. complete ition as |
| By: 15/103 | |
| (Signature of Registered Agent) (Date) | |
| If signing on behalf of an entity: | |
| Kevin A. Sebunia Asst. Secy. (Typed or Printed Name) (Capacity) | |

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

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314