"H09451

(R	equestor's Name)	
(A	ddress)	• • •
(A	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(B	usiness Entity Na	me)
(D	ocument Number)	1
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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ACCOUNT NO. : 072100000032
REFERENCE : 919800 7576516
AUTHORIZATION :
COST LIMIT : \$35.00
ORDER DATE: May 25, 2007
ORDER TIME : 11:44 AM
ORDER NO. : 919800-005
CUSTOMER NO: 7576516
CHANGE OF AGENT NAME: ALAFAYA UTILITIES, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Susie Knight EXT# 2956 EXAMINER:

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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this hange is submitted for a corporation organized under the laws of the State of Florida	
	der to change its registered office or registered agent, or both, in the State of Florida.	_
1. The name of	f the corporation: ALAFAYA UTILITIES, INC.	
	al office address: 200 Weathersfield Avenue, Altamonte Springs, FL 32714	-
3. The mailing a	address (if different): 2335 Sanders Road, Northbrook, IL 60062	
4. Date of incor	prporation/qualification: June 25, 1984 Document number: H09451	
	nd street address of the current registered agent and registered office on file with the artment of State:	
	C T Corporation System	
	1200 South Pine Island Road Plantation, FL 33324	N
	Plantation, FL 33324	5
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered office	U
	Corporation Service Company	
	1201 Hays Street	
	(P.O. Box NOT acceptable)	
	Tallahassee, FL 32301	
The street address changed will	ress of its registered office and the street address of the business office of its registered age ll be identical.	nt,
Such change was authorized by the	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
	Thure of an officer or director) JAHN STOUER VP + SECRETMY (Printed or typed name and title)	
I hereby accept I further agree of my duties, an document is bei corporation has	of the appointment as registered agent and agree to act in this capacity. It the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete performa and I am familiar with and accept the obligation of my position as registered agent. Or, if the performance in the registered office address, I hereby confirm that it is been notified in writing of this change.	nce this the
Corporal By:	ation Service Company 5 - 29 - 07	
S (S	Senature of Registered Agent) (Date)	-
If signing on be	behalf of an entity:	
Sylvia Quer		
(7	(Typed or Printed Name)	
	* * * FILING FEE: \$35.00 * * *	

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