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C T CORPORATION SYSTEM			<del>P</del>	
Requestor's Name 660 East Jefferson Str	ceet			
Address Tallahassee, FL 32301	(850)222-1092		,	
City State Zip	Phone	900	1003038109: -11/08/9901070024	
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Acknowledgment	- <del>-</del>			
W.P. Verlfier	•			

## Florida Department of State, Jim Smith, Secretary of State

## 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, the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1a. The name of the corporation is: TCI Cablevision of Florida, Inc.
1b. Date of incorporation September 30, 1986 Document number 6052-739-8
2. The name and address of the current registered agent and office:  The Prentice Hall Corp. System, Inc.
1201 Hayes Street, Ste. 105, Tallahassee FL 32301
3. The name and address of the new registered agent and office:  (P.O. Box Not Acceptable)  C T CORPORATION SYSTEM
c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation Florida 33324
The street address of its registered agent 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.  Charles W. Meyer Asst. Secy  SIGNATURE  November 1, 1999  DATE
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.
SIGNATURE BY: Sall No Land (Registered Agent)
DATE November 1, 1999
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-91)

Filing Fee: \$35.00