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Local Name 2

Division of Corporations

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Page 1 of 2

TECO 2

1/2

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REGISTERED AGENT CHANGE TECO FINANCE, INC.

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Abbreviations:

Local ID 2

HS: Host send **HR: Host receive** WS: Walting send PL: Polled local PR: Polled remote MS: Mailbox save

MP: Mallbox print

CP: Completed

TS: Terminated by system

RP: Report FF: Fax Forward

FA: Fail TU: Terminated by user G3: Group 3 EC: Error Correct



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, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: TECO Finance, Inc.
2. The principal office address: 702 N. Franklin Street, Tampa, FL 33602
3. The mailing address (if different): P.O. Box 111, Tampa, FL 33601
4. Date of incorporation/qualification: 05/04/1987 Document number: J70740
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
C. A. Attal, III
702 North Franklin Street
Tampa, FL 33602
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
David M. Nicholson
702 North Franklin Street
P.O. Box NOT acceptable
Tampa, FL 33602
The street address of its registered office 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, or the corporation has been notified in writing of the change.
David E. Schwartz, Corporate Secretary
Signature of an officer or director Printed or typed name and title I hereby accept the appointment as registered agent and agree to act in this capacity.
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 dulies, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent 9/2/16
If signing on behalf of an entity:
David M. Nicholson
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
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