

CT CORPORATION

CORPORATION(S) NAME

L000000011871

Adelphia Cablevision of West Palm Beach IV, LLC

0

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB 22 AM 11:17

APPROVED
AND
FILED

☐ Profit
☐ Nonprofit
☐ Foreign

☐ Amendment
☐ Dissolution/Withdrawal
☐ Reinstatement

☐ Merger

☐ Limited Partnership
☐ LLC

☐ Annual Report
☐ Name Registration
☐ Fictitious Name

☐ Mark
☐ Other
☒ Change of RA
☐ UCC
☐ CUS

☐ Certified Copy

☐ Photocopies

☐ Call When Ready
☒ Walk In
☐ Mail Out

☐ Call If Problem
☐ Will Wait

☐ After 4:30
☒ Pick Up

RECEIVED
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

2/22/02

Order#: 5112009

000004990810--6
-02/22/02--01024--012

Ref#: *****25.00 *****25.00

Amount: \$ _____

2-22-02

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: Adelphia Cablevision of West Palm Beach IV, LLC

2. The mailing address of the limited liability company is : _____

1 North Main Street, Coudersport PA 16915

September 27, 2000

L00000011871

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Corporation Service Company

Name

1201 Hays Street

Address

Tallahassee FL 32301

City, State and Zip

6. The name and address of the new registered agent and/or office:

C T Corporation System

Name

1200 South Pine Island Road

Florida street address (P.O. Box NOT acceptable)

Plantation

FL 33324

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Curt Kreisel - Authorized Representative
(Signature of a member or authorized representative of a member)

Curt Kreisel
(Printed or typed name of signee)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

C T Corporation System
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA

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