CORPORATION SYSTEM
CORPORATION(S) NAME

CORPORATION(S) NAME

Peoples Gas Company LLC			
0			
			<del></del>
- 1129			
	-		
		<b>5000038</b> -03/13/	50835-9 0101071012
		米班米米马达	5.00 *****35.00
() Profit	() Amendment	() Merger	
() Nonprofit			
() Foreign	() Dissolution/Withdrawal	() Mark	Carry Tr. White Co.
	() Reinstatement		man enter the state of the stat
() Limited Partnership	() Annual Report	() Other	
()LLC	() Name Registration	Change of RA	
	() Fictitious Name	()\ucc	
() Certified Copy	() Photocopies	() CUS	i N
() Call When Ready	() Call If Problem	() After 4:30	Contract manufacture of the second manufactu
(x) Walk In	() Will Wait	(x) Pick Up	
() Mail Out	() I'm Han	(A) TION OP	<u>.                                    </u>
Name	2/12/01	0.1 11 2452155	20 Zu
Name Availability	3/13/01	Order#: 3473157	DIVISION PAR
·		and the second s	
Document		7 211 OS	
Examiner		Ref#:	
Updater		- E.S.	
Verifier	·	कें	No Rolling
W.P. Verifier		Amount: \$	CEIVED FORFORATIONS 3 PM 2: 24
			-
		(	7.18

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 9 \$3001

## 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 lim	ited liability comp	pany is: PEOPLES G	AS COMPANY, LLC	
2. The mailing address	of the limited lial	bility company is:	8801 S. Yale	e Avenue
Suite 310,	Tulsa, OK 7	4137		
				,
8/7/00			M0000001555	
<ol><li>Date of filing/regists</li></ol>	ation in Florida		4. Document nun	iber
5. The name of the regi Florida Department	of State:	_	address as shown o	on the records of the
	David E Schwar		<del></del>	
		Name		
	702 North Frank			- ूर्यम
		Address	_	<u> </u>
	Tampa FL 33602	City, State and Z	·	Manager and American and Americ
		City, State and Z	ıħ	Mercial III III III III III III III III III I
<ol><li>The name and address</li></ol>	ss of the new regis	stered agent and/or o	office:	100 Ly 200
	am a	<b>a</b> .		The state of the s
	CT Corporation	*		
	1200 South Pine I	Name		
		address (P.O. Box	NOT acceptable)	Prince Mary Control of the Control o
	A TOTAGE BELOOF	address (1.0. Don	reor acceptance)	
	Plantation	FL 33324		
		City, State and Zip	)	
the members of the lim the operating agreemen	change or change of the registered a hereby confirmed ited liability comp t of the limited lia	es are made, the Flo agent will be identic that the change(s) vo any or as otherwise ability company.	rida street address of al. Or, in the case of vas/were authorized	of the registered office
(Signature of a member or aut	horized representative o lanager,	f a member)		
Larry J. Dagley, V		and CFO		
(Printed or typed name of sign				
I hereby accept the app comply with the provisi and I am familiar with Chapter 608, F.S. Or, address, I hereby confit C T Corporation system  (Signature of Registered Res	ons of all statutes and accept the objict this document is mutation that the limited	stered agent and aging trelative to the property in the property is being filed to mere all tability company to the property in the property is the property in the property is the property in the property in the property is the property in the property in the property is the property in the property in the property in the property is the property in the property i	per and complete per tion as registered a cly reflect a change has been notified in	pacity. I further agree to erformance of my duties, igent as provided for in in the registered office writing of this change.

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

FILING FEE: \$25.00

FL015-9/27/99 C T System Online

INHS18(10/99)