

MD200 0001284

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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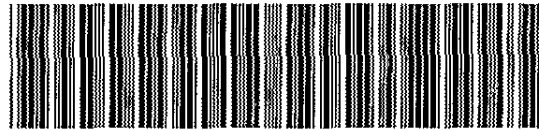
(Business Entity Name)

(Document Number)

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DIVISION OF REGISTRATION

5-2-03



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 937738 7320965

AUTHORIZATION : *Patricia Pigato*

COST LIMIT : \$ 25.00

ORDER DATE : February 20, 2003

ORDER TIME : 2:48 PM

ORDER NO. : 937738-025

CUSTOMER NO: 7320965

CUSTOMER: Ms. Myra Coleman
Agl Resources, Inc.
10th Floor
817 W. Peachtree Street
Atlanta, GA 30308

CHANGE OF AGENT

NAME: AGL NETWORKS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

SECRETARY OF STATE
CLERK OF COURT

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AND
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**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: AGL NETWORKS, LLC

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

Ten Peachtree Place, Atlanta, GA 30309

May 21, 2002

M02000001284

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:

NRAI Services, Inc.

Name

526 East Park Avenue

Address

Tallahassee, FL 32301

City, State and Zip

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

Corporation Service Company

Name

1201 Hays Street

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

Tallahassee

FL

32301

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.

Paul R. Shlanta
(Signature of a member or authorized representative of a member)

Paul R. Shlanta, Authorized Person
(Printed or typed name of signer)

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.

Cynthia L. Harris
(Signature of Registered Agent)

Cynthia L. Harris
as its agent

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

APPROVED
AND
FILED
03 MAY -2 AM 9:36
SECRETARY OF STATE
TALLAHASSEE, FL 32301