M0300000475

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Eachiese Enar, value)
(Document Number)
·
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

SECRETARY OF STATE TALLAHASSEE, FLORIDA



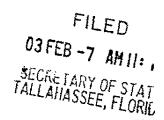
100011779471

02/07/03--01071--009 **160.00

AL

FILED APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZED TO AFFILE 17 TRANSACT BUSINESS IN FLORIDA IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECESSED S LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: [Jurisdiction under the law of which foreign limited liability company is organized) 5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual") Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Operation & Maintenance Treatment a Distribution Facilitie's Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Sanju P: Ilai Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE



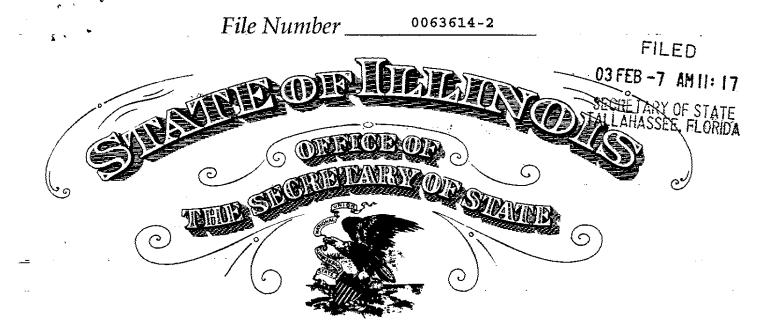
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

. The name of the Limited Liability Company is:	
SI Utility Group, L.L.C.	
2. The name and the Florida street address of the registered agent and office are:	
CT Corporation System (Name)	
Florida street address (P.O. Box NOT ACCEPTABLE)	 _
Plantation FL 33324 (City/State/Zip)	

Having been named as registered agent and to accept service of process for the above stated limited liability company 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 relating 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.

Jeffrey R. Graves Assistant Secretary

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

SI UTILITY GROUP, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 07, 2001, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.



In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this ______ A.D. ______.

Desse White