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SEURETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUN 20 AMII: I



June 14, 2005

FLORIDA SECRETARY OF STATE Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attn: Corporate Filing Dept.

Re: ORLANDO POWER HOLDINGS, L.L.C.

Dear Filing Officer:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations, for the above referenced name, which is to be filed in your office. Also enclosed is check #8811 in the amount of \$25.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions, please contact x123 at 800-345-4647.

Thank you,

Delanie Case

Registered Agent Services

Enclosures

05 JUN 20 AM II: 17
SECRETARY OF STATE
TALL AHASSEE, FLORIDA

PO BOX 1831 AUSTIN, TX 78767

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.

OPLANDO DOMEDIAO DINOCALA
1. The name of the limited liability company is: ORLANDO POWER HOLDINGS, L.L.C.
2. The mailing address of the limited liability company is: 2929 Allen Parkusay,
Suite 2200, Houston Tx 77019
7/1/04 M04000002603
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:
C T Corporation System
Name 1200 South Pine Island Road
Plantation, FL 33324
City, State and Zip
6. The name and address of the new registered agent and/or office:
Capitol Corporate Services, Inc. Name 1333 North Duyal St
Capitol Corporate Services, Inc.
1333 North Duval St.
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32303
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. (Signature of a member or authorized representative of a member)
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.
(Signature of Registered Agent) Delanie Case, Asst. Sec.

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

INHS18(10/99)

FILING FEE: \$25.00

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.

2. The mailing address of the limited liability company is: 2929 Allen Parkusay. Soite 2200 Houston TV 17019 7/1/04 M04000002603 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: CT Corporation System Name 1200 South Pine Island Road Address CT Corporation System
7/1/04 M0400002603 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: C T Corporation System Name 1200 South Pine Island Road
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Florida Department of State: C T Corporation System Name 1200 South Pine Island Road
Name 1200 South Pine Island Road
1200 South Pine Island Road
Address
Plantation, FL 33324
Plantation, FL 33324 City, State and Zip
o. The name and address of the new registered agent and/or office:
Capitol Corporate Services, Inc.
1333 North Duval St.
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32303 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.
Return acknowledgment to:
(Signature of a member or authorized representative of a member) Capitol Corporate Services, Inc.
Printed or typed name of signee) RO. Box 1831 Austin, TX 78767 800/345-4647
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 auties, 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.
(Signature of Registered Agent) Delanie Case, Asst. Sec.

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

FILING FEE: \$25.00