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(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)	FILED 07 OCT 12 PH 12: 56 SECRE TARY OF STATE TALLAHASSEE, FLORIDA			
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Office Use Only



CORPORATION SERVICE COMPANY.

	ACCOUNT NO.	:	07210000032	
	REFERENCE	:	241599 7157369	
	AUTHORIZATION	:	Spulleran	
	COST LIMIT	:	\$ 25.00	
ORDER DATE :	September 24, 20	07		TAL
ORDER TIME :	9:25 AM			CRET
ORDER NO. :	241599-635			Sal n
CUSTOMER NO:	7157369			E PH D
<b></b>				5
	CHANGE OF A	CEN	m	

CHANGE OF AGENT

(

NAME: INFRASOURCE-MASLONKA, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS:

## 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: INFRASOURCE - MASLONKA, LLC

2. The mailing address of the limited liability company is : <u>100 West Sixth Street</u>

Media, PA 19063

## 05/18/2006

3. Date of filing/registration in Florida

## <u>M0600002797</u>

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:

	<u>CT Corporation System</u>	
	Name	
	1200 South Pine Island Rd	
	Address	TASE OF
	Plantation, FL 33324	F9 8 1
	City, State and Zip	
6. The name and address	of the new registered agent and/or office:	ASSE P
	Corporation Service Company	
	Name	55 5
	1201 Hays Street	ATE DRIDA
	Florida street address (P.O. Box NOT acceptable)	P
	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.

(Signature of a member or authorized representative of a member)

## Elizabeth A. Dawson, Authorized Person

(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) Comparison

red Agent) Sylvia Queppet, Asst. VP Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (8/05)