

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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LLC REGISTERED AGENT CHANGE CRIUS ENERGY MANAGEMENT, LLC

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

	5. Florida Statutes, the undersigned limited liability company gistered office or registered agent, or both, in the State of
Florida. 1. Name of the Limited Liability Company: CRIUS ENEI	RGY MANAGEMENT, LLC
2. (a) 535 Connecticul Avenue Principal office address of timited liability company: (Note: MUST BE STREET ADDRESS)	(b) 535 Connecticut Avenue Malling address of limited liability company: (Note: MAY DE POST OFFICE BOX)
6th Floor	6th Floor
Norwalk, CT 06854	Norwalk, CT 06854
12/10/2012 3. Date of filing/registration in Florida	M1200006877 4. Document number
5. (a) CORPORATION SERVICE COMPANY Registered Agent and Registered Office shown on the records o	of the Florida Dept. of State:
1201 HAYS STREET Registered Office Address MUST BE PLORIDA STRUE	_
TALLAHASSEE , F	32301 FALL TALL
(b) Capitol Corporate Services, Inc. Enter motion of NEW Registered Agent and/or NEW Registered	SECRETARY OF STALLAHASSEE.
515 East Park Avenue 2nd Fl NBW Registered Office Address:	HIZ: 3:
The state of the s	FL 32301
the change of changes are made, the florida street address	laws of the State of Florids, it is hereby confirmed that after to fithe registered office and the business office of the registered il liability company, it is hereby confirmed that the change(s) as of the limited liability company or as otherwise provided in the limited liability company.
Signature of a mamber or authorized representative of a member	Printed or typed space of signers
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and complete obligations of my position as registered agent as provious merely reflect a change in the registered office address neithed in writing of this change.	agree to act in this capacity. I further agree to comply with the lete performance of my duties, and I am familiar with and accept add for in Chapter 605, F.S. Or, if this document is being filed s, I hereby confirm that the limited Itability company has been
	anie Case, Assistant Secretary on alf of Capitol Corporate Services, Inc.
Division of Corporations P.	O. Box 6327 Tallahassec, FL 32314 G FEE: S25.00
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INHS18 (2/14)