P19549

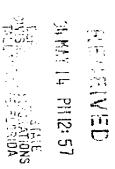
(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Coples	Certificates	of Status
Special Instructions to F	filing Officer:	

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P. A. C. Coullister MAY 1 4 2004



ACCOUNT NO. : 072100000032

REFERENCE: 641230 7389086

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: May 12, 2004

ORDER TIME : 11:06 AM

ORDER NO. : 641230-110 ___

CUSTOMER NO: 7389086

CUSTOMER: Patty Conroy

Adelphia Communications

Suite 800

5619 Dtc Parkway

Greenwood Villa, CO 80111

CHANGE OF AGENT

NAME: CHELSEA COMMUNICATIONS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 607.1		tement of
	nitted for a corporation organized under the laws	· · · · · · · · · · · · · · · · · · ·	in order
to change its re	egistered office or registered agent, or both, in the	State of Florida.	
1. The name of	the corporation: CHELSEA COMMUNICATIONS,	INC.	,
2. The principal	I office address: 1 North Main, Couderspo	rt, PA 16915	·
3. The mailing	address (if different): 1 North Main, P.O. 1	Box 472, Coudersport, PA 16915	· · ·
4. Date of incor	poration/qualification: 06/06/1988 D	ocument number: P19549	
	d street address of the current registered agent and rtment of State:	registered office on file with the	
	C T Corporation System	· · · · · · · · · · · · · · · · · · ·	
	1200 South Pine Island Road		
	Plantation, FL 33324		
6. The name and (if changed):	d street address of the new registered agent (if cha	nged) and /or registered office	E HAY
	Corporation Service Company		LED
	1201 Hays Street		
	(P.O. Box or personal mailbox NO	Tacceptable)	1
	Tallahassee, FL 32301		
The street addre	ess of its registered office and the street address identical.	of the business office of its registered age	nt, as
Such change wathe board, or the	as authorized by resolution duly adopted by its le e corporation has been notified in writing of the	poard of directors or by an officer so author change.	orized by
M	Signature of an officer or director) Cully	Maureen Cullen, Attorney in Fact (Probled or typed name and title)	
	the appointment as registered agent and agree to comply with the provisions of all statutes rela I familiar with and accept the obligation of my pely to reflect a change in the registered office ac writing of this change	to act in this capacity, tive to the proper and complete performa position as registered agent. Or, if this do ldress, I hereby confirm that the corporati	nce of my cument is on has
_	Service Company	May 5, 2004	
	(Signature of Registered Agent)	(Date)	
f signing on be	half of an entity:		
Sylvia Quepp		Asst. Vice President	
	(Typed or Printed Name)	(Capacity)	