## P950000H6456

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE FALLAHASSEE, FLORID FILED 2007 MAY 30 PM 4: 21

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DEPARTMENT OF STATE OF STAT

100 P. 5/31/07



ON SERVICE COMPANY	y: 🗫				
	ACCOUNT NO.	:	072100000	032	
	REFERENCE	: '	919800	7576516	
•	AUTHORIZATION	:	La	Mal.	
	COST LIMIT	:	\$ 35.00	Melenan	ر 
ORDER DATE :	May 25, 2007				
ORDER TIME :	12:58 PM				
ORDER NO. :	919800-480				
CUSTOMER NO:	7576516				
	CHANGE OF A	<u>GEN</u>	<u>T</u>		
NAME:	UTILITIES, IN		OF LONGWOO	D	
					,
	•				
•	THE FOLLOWING AS	PR	OOF OF FIL	ING:	
CERTI PLAIN	FIED COPY STAMPED COPY				
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ביראוייא ביי הפספה	N. Guaia Kniaht		ロメヤサ つのちん		

EXAMINER:

## $^{\circ}$ STÄTEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: UTILITIES, INC OF LONGWOOD
2. The principal office address: 200 Weathersfield Avenue, Altamonte Springs, FL 32714
3. The mailing address (if different): 2335 Sanders Road, Northbrook, IL 60062
4. Date of incorporation/qualification: June 15, 1995 Document number: P95000046456
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:
C T Corporation Systems
1200 South Pine Island Road
Plantation, FL 33324
Florida Department of State:  C T Corporation Systems  1200 South Pine Island Road  Plantation, FL 33324  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Corporation Service Company
1201 Hays Street
(P.O. Box NOT acceptable)
Tallahassee, FL 32301
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
LOWN STOVER, UP & SECRETARY
(Signature of an officer or director)  Low States, NP + Secretary  (Printed or typed name and title)
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Corporation Service Company  By:   (Agenature of Registered Agent)  (Date)
By: Signature of Registered Agent) Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Sylvia Queppet, AVP
(Typed or Printed Name)
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314