P95000061183

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)EPARIMENT OF STATE VISION OF CORPORATIONS ALL AHASSEE, FLORIDA

1200 5/31/01



ACCOUNT NO. : 07210000032					
REFERENCE : 919800 7576516					
AUTHORIZATION: Spresseeman					
COST LIMIT : \$ 35.00					
ORDER DATE : May 25, 2007	-				
ORDER TIME : 12:55 PM					
ORDER NO. : 919800-445					
CUSTOMER NO: 7576516					
· ·					
CHANGE OF AGENT					
•					
NAME: UTILITIES, INC. OF EAGLE RIDGE					
\					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
IMIN DIMINDS COLL					
CONTACT PERSON: Susie Knight EXT# 2956					
EXAMINER:					

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

statement of ch	provisions of sections 607.0302, 617.03 ange is submitted for a corporation orga	unized under the laws of the	State of Florida	
	er to change its registered office or regis	_	State of Florida.	
1. The name of	the corporation: UTILITIES, INC OF E	AGLE RIDGE		
2. The principal	office address: 200 Weathersfield Aven	ue, Altamonte Springs, FL 32	714	
3. The mailing	address (if different): 2335 Sanders Road	d, Northbrook, IL 60062		
4. Date of incor	poration/qualification: August 8, 1995	Document number:	P95000061183	
	d street address of the current registered artment of State:	agent and registered office of		
	C T Corporation Systems		CRE T	
	1200 South Pine Island Road		FILED 2007 MAY 30 PM L SECRETARY OF STALLAHASSEE.FU	
	Plantation, FL 33324			
6. The name an (if changed):	d street address of the new registered ag	ent (if changed) and /or regi	Stered of Stered	
	Corporation Service Company		- 	
	1201 Hays Street			
(P.O. Box NOT acceptable)				
	Tallahassee, FL 32301			
The street addr as changed wil	ress of its registered office and the street le identical.	et address of the business o	ffice of its registered agent,	
Such change wanthorized by	vas authorized by resolution duly adopt the board, or the corporation has been	ted by its board of directors notified in writing of the ch	or by an officer so lange.	
\mathcal{N}	-	JOHN STOUTE	NP & SECRETIALY	
I hereby accep I further agree of my duties, a document is be corporation ho	the of an officer or director) If the appointment as registered agent of the comply with the provisions of all stand I am familiar with and accept the oping filed merely to reflect a change in as been notified in writing of this change on Service Company	and agree to act in this cap atutes relative to the proper bligation of my position as the registered office addres	acity. acity. ar and complete performance registered agent. Or, if this ss, I hereby confirm that the	
T	^	, 5-29.	- 07	
(S	Signature of Registered Agent)	(Da	te)	
If signing on b	ehalf 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 CR2E045 (8/05)