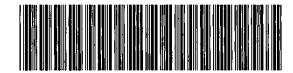
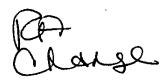
## P97000082608

(D-				
(Requestor's Name)				
(Ad	dress)			
(Address)				
		•		
(Cit	:y/State/Zip/Phone	e #)		
PICK-UP	■ WAIT	MAIL		
/D.	siness Entity Nan	20		
(60	isiness Entity Nan	ne)		
		·		
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer			
Special Instructions to Filing Officer:				
		,		
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Office Use Only



400102733384



2007 MAY 30 PM 4: 28 SECRETARY OF STATE TALLAHASSEE, FLORID!

FILED

BECEIVED

ADE 5/31/07



•	ACCOUNT NO.	: 072100000	032			
	REFERENCE	: 919800	7576516			
	AUTHORIZATION	: 100				
	COST LIMIT	: Spelled	ena			
ORDER DATE :	May 25, 2007					
ORDER TIME :	11:58 AM					
ORDER NO. :	919800-145					
CUSTOMER NO:	7576516	·				
CHANGE OF AGENT						
,						
NAME: CYPRESS LAKES UTILITIES, INC.						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY  XX PLAIN STAMPED COPY						
/	•					
CONTACT PERSON: Susie Knight EXT# 2956						
		EXAMINER:				

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Floorganized under the laws of the Sta registered agent, or both, in the Sta	te of Florida
1. The name of t	he corporation: CYPRESS LAKES	S UTILITIES, INC.	
		Avenue, Altamonte Springs, FL 32714	4
3. The mailing a	ddress (if different): 2335 Sanders	Road, Northbrook, IL 60062	
4. Date of incorp	poration/qualification: September 23	3, 1997 Document number:P9	7000082608
	street address of the current regist tment of State:	tered agent and registered office on f	file with the
	C T Corporation System		·
	1200 South Pine Island Road		TIL 2007 MAY 30 SECRETAR)
	Plantation, FL 33324		AY 30 HASSI
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or register	red officer 3
	Corporation Service Company		4: 28
	1201 Hays Street		
	(P.O. Box NOT ac	cceptable)	<del></del>
	Tallahassee, FL 32301		
The street addre	ss of its registered office and the be identical.	street address of the business offic	e of its registered agent,
Such change was authorized by the		dopted by its board of directors or een notified in writing of the chang	by an officer so ge.
(Signatu	A an officer or director)	John Stough (Printed or typed na	P - SECRETARY
	the appointment as registered ag o comply with the provisions of a d I am familiar with and accept t ng filed merely to reflect a chang been notified in writing of this co Service Company	ent and agree to act in this capacit all statutes relative to the proper an he obligation of my position as reg e in the registered office address, I hange.	ty. id complete performance istered agent. Or, if this hereby confirm that the
By: ` <u></u>	1- annu	(Date)	-07
(Sig	nature of Registered Agent)	(Date)	
If signing on be	half of an entity:		
Sylvia Queppet,	AVP		
T)	yped or Printed Name)	•	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*