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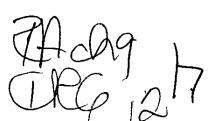


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(850) 521-0700 FAX (850) 521-0720

December 4, 2009

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Subject:

Registered agent for B&S Utilities, Inc.

Dear Sir or Madam.

B&S Utilities, Inc., by and through its undersigned counsel, hereby states that the "All Florida Firm" of Deltona, Florida has never served as its registered agent in any capacity, and any such representation, record or otherwise, is fraudulent. It is our understanding that the "All Florida Firm" is currently the object of an active public consumer-related investigation by the Attorney General of the State of Florida (Case No. L08-3-1014). We have no knowledge of the means by which the "All Florida Firm" committed its fraud against the company, and are reporting this fraud immediately upon learning of it. We request that the records of the Department of State, Division of Corporations be amended to reflect the fact that the "All Florida Firm," its officers, agents, and employees, have never had any legal authority to serve as registered agent for B&S Utilities, Inc., in any matter or proceeding at any time. We greatly appreciate your assistance. Please call me with any questions.

Timothy P. Atkinson

## **COVER LETTER**

Division of Co	porations		
SUBJECT:	B&S Utiliti		
	Name of	Corporation	
DOCUMENT NUMB	er: P98	3000067573	
The enclosed Statement	of Change of Registered Offi	ce/Agent and fee are subm	nitted for filing.
Please return all corresp	oondence concerning this matte	er to the following:	
_	Timothy P. At Name of Co	kinson, Esquire ontact Person	
	Oertel, Fernandez, Firm/C	Cole & Bryant, P.A.	
		ox 1110 dress	<u></u>
	Tallahassee, City/State a	Florida 32302 and Zip Code	
E-n	tatkinson@ nail address: (to be used for	Dohfc.com future annual report not	ification)
For further information	concerning this matter, please	call:	
Timot	ny P. Atkinson	at (850)	521-0700
	Contact Person	Area Code & Day	time Telephone Number
Enclosed is a \$35.00 ch	eck made payable to the Depar	rtment of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment S Division of C Clifton Build 2661 Executiv Tallahassee, I	orporations ing ve Center Circle

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

statement of cha	ange is submitted f	for a corporation organ	2, 607.1508, or 617.1508, Flor ized under the laws of the State ered agent, or both, in the State	of Florida
	the corporation:	gisterea office or registe B&S Utilities, It		of Florida.
	office address:	3642 Peddie Driv		
		Tallahassee, Flor	ida 32303	
3. The mailing a	address (if differen	at): same		
4. Date of incor	poration/qualificat	tion:08/03/1998	Document number:	P98000067573
		the current registered as f resigned, enter resigned	gent and registered office on filed)	e with the 99 PLT
	B&S Utilities,	Inc. asserts that th	e "All Florida Firm," has	
	never served	as its agent, and a	ny such representation,	
	recorded or o	therwise, is fraudu	lent. (See attached letter	**************************************
6. The name and (if changed):	d street address of	the new registered agen	t (if changed) and /or registered	
	Timothy P. At	tkinson		
	P.O. Box 111	Q 301 S. Bronos P.O. Box NOT	ugh, Suite 500	<del></del>
	Tallahassee,	Florida 32302	(32301)	
The street addreas changed will	ess of its registere be identical.	ed office and the street	address of the business office	of its registered agent,
Such change wa authorized by the	as authorized by r he board, or the co	resolution duly adopted orporation has been no	by its board of directors or by tified in writing of the change	y an officer so
	re of an officer or director		Shelley Atkinsor	and title
I hereby accept I further agree to of my duties, and document is bei corporation has	the appointment of the comply with the standard of the comply with the standard of the complete	as registered agent an e provisions of all stati vith and accept the obli o reflect a change in the writing of this change.	d agree to act in this capacity, ttes relative to the proper and gation of my position as regis e registered office address, I h	complete performance tered agent. Or, if this vereby confirm that the
- Family	hature of Registered Age	ent	December 4	, 2009
	chalf of an entity:			
E	3&S Utilities, In	oc.		
1)	'yped or Printed Name	* * * FILING FE	E: \$35.00 * * *	