Delaware Division of Corporations 401 Federal Street – Suite 4 Dover, DE 19901

Phone: 302-739-3073 Fax: 302-739-3812

Certificate of Change of Agent

Dear Sir or Madam:

In reply to your recent request, enclosed is a copy of a Certificate of Change of Registered Agent and/or Agent Address to be filed in accordance with the General Corporation Law of the State of Delaware. The fee for filing the certificate is \$104.00 (\$49.00 for non-profit corporations). If your document is more than 1 page then please add \$9.00 for each additional page. You may request a certified copy for an additional \$30.00. Expedited services are available. Please contact our office concerning these fees. Please make your check payable to "Delaware Secretary of State".

For the convenience of processing your order in a timely manner, please include a cover letter with your name, address and telephone/fax number to enable us to contact you if necessary. Please make sure you thoroughly complete all information requested on this form. It is important that the execution be legible, we request that your print or type your name under the signature line.

Thank you for choosing Delaware as your corporate home. Should you require further assistance in this or any other matter, please don't hesitate to call us at (302) 739-3073.

Sincerely,

Department of State Division of Corporations

encl. rev. 07/04

STATE OF DELAWARE CERTIFICATE OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE

| The Board of Directors of | |
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| | day of |
| , A.D | _, do hereby resolve and order that the |
| location of the Registered Office of this | s Corporation within this State be, and the |
| same hereby is | |
| Street, | in the City of, |
| County of | Zip Code |
| • | nerein and in charge thereof upon whom served, is |
| The Corporation does hereby certify resolution adopted by the Board of Direction | that the foregoing is a true copy of a ctors at a meeting held as herein stated. |
| | poration has caused this certificate to be day of |
| Ву: | Authorized Officer |
| Name: _ | Print or Type |
| m: d | - - |