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OB MAY 21 AM B: OLECRETARY OF STATE

Division of Corporations

Fax Number : (850)617-6380

1 (000)01, 000

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5926



MCCANN-ERICKSON MARKETING INC

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Electronic Filing Menu

Corporate Filing Menu

Help



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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of New York or to change its registered office or registered agent, or both, in the State of Florida.	
	the corporation: McCean-Erickson Marketing TKC	
	office address: 1114 6th Avenue, 18th Floor, New York, NY 10036	
3. The mailing ac	ddress (if different):	
4. Date of incorp	poration/qualification: 02/05/1970 Document number: 824087	
	street address of the current registered agent and registered office on file with the tunent of State:	
	Corporation Service Company	
	1201 Hays Street, Tallahassee, FL 32301	
	Tallahassee, FL 32301	
6. The name and (if changed):	i street address of the new registered agent (if changed) and /or registered office	"
	C T Corporation System	
	c/o C T Corporation System, 1200 South Pine Island Road	
	(P.O. Box NOT acceptable) Plantation, Florida 33324	Propies.
The street addre		et.
Such change was authorized by the	ess of its registered office and the street address of the business office of its registered agent be identical. as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change. Mark Eppley, Attorney in Fact (Printed or typed name and line)	-
I hereby accept I further agree to of my duties, an document is bet corporation has	t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performan nd I am familiar with and accept the obligation of my position as registered agent. Or, if t ing filed merely to reflect a change in the registered office address, I hereby confirm that t s been notified in writing of this change.	ice his he
By:	C T Corporation System 5/14/08 (Date)	-
	ethalf of an entity: Mark S. Eppley Assistant Vice-President Typed or Printed Name) and Secretary	:
	* * * FILING FEE; \$35.00 * * *	
М	Make checks payable to Florida Department of State Iail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314	

PL006 - 09/14/2005 C T System Online

CR2E045 (8/05)