

ACCOUNT NO. : 07210000032

REFERENCE :

651178 7139998

AUTHORIZATION Lattice

COST LIMIT : \$ 35.00

ORDER DATE: December 29, 1997

ORDER TIME : 1:28 PM

ORDER NO. : 651178-750

CUSTOMER NO: 7139998

CUSTOMER: Mr. Jay Scarborough Usi Holdings, Inc. 235 Pine Street

San Francisco, CA 94104

700002468237-

CHANGE OF AGENT

NAME:

INTERNATIONAL BENEFIT SERVICES

CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Glisar

Florida Department of State, Sandra B. Mortham, Secretary of State

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

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

	e provisions of sections 607.0502, 6		508, Florida Statutes, the
	orporation organized under the laws lowing statement in order to change		ered agent or hoth in the
State of Florid			ou agons, or oom, in me
		The second secon	
1. The name of	f the corporation is: International	Benefit Services Corpora	ition
2. The mailing	address of the corporation is:		
3. Date of inco	rporation/qualification: 5/19/81	Document numb	er:
4. The name ar	nd address of the current registered ag	gent and office:	
	C T Corporation System	- International Control of the Contr	98 TALL
	1200 South Pine Island Road		MAR 25 CRETAIN AHASSI
5 The name or	Plantation, Florida 33324 and address of the new registered agen	t and office: (P. O. Pov. Not A	agantable) IFT.
J. THE HAME W	Corporation Service Company	`	cceptable) F.F.S.
	1201 Hays Street		06 ATE ORIDA
	Tallahassee, FL 32301		<u></u> .
The street add agent, as chan	ress of its registered office and the ged, will be identical.	street address of the business	office of its registered
Such change vauthorized by	vas authorized by resolution duly acthe board.	dopted by its board of directo	ors or by an officer so
4	a. Diane Gr. Adin	ز	3/20/98
(Signature	of an officer, chairman or vice chairplan of the	c board)	(Date)
A. Diane Grif	fin, Secretary		
	(Printed or typed name and title)		(Date)
Having been n corporation, I I further agree performance o	amed as registered agent and to ac hereby accept the appointment as r to comply with the provisions of a f my duties, and I am familiar with	cept service of process for the egistered agent and agree to ll statutes relative to the prop and accept the obligation of	ne above stated o act in this capacity. oer and complete ony position as
registered agei	40lm Shutes e) 3/24/99	
- (Signature of Registered Agent)	(Date)	
If signing on beh	alf of an entity:		
Vivien Mitch	ell,	Assistant Vice Presid	dent
	(Typed or Printed Name)	(Cap	acity)