

F03000002383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*RAEN
9/29/10*



September 24, 2010

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

RE: 1. Coface Collections North America, Inc. (Delaware Domestic)
2. Coface North America, Inc. (NY Domestic)
3. Coface North America Insurance Company (Massachusetts Domestic)
Order # PS/PM-10-0345

Dear Sir/Madam:

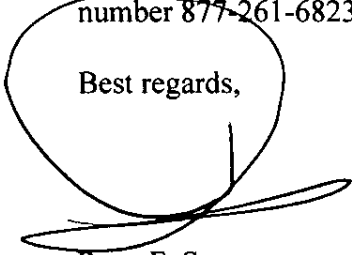
I now enclose the required forms to change the agent on behalf of the above named companies in your state.

We also enclose check(s) in payment of your fees.

Please file the enclosed as soon as possible, returning evidence to the undersigned.

If for any reason filing(s) cannot be completed, please let me know by calling our toll free number 877-261-6823 x 1759.

Best regards,


Peter F. Souza
Vice President/Senior Corporate Specialist

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of DE in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Coface Collections North America, Inc.
2. The principal office address: 50 Millstone Road. Building 100, Suite 360
East Windsor, New Jersey 08520
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/13/2003 Document number: F03000002383
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System

1200 South Pine Island Road

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.

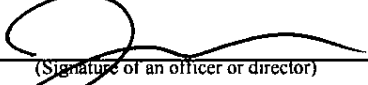
2731 Executive Park Drive, Suite 4

(P.O. Box NOT acceptable)

Weston, FL 33331

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

James McDermott, Secretary

(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

9/23/10
(Date)

If signing on behalf of an entity:

Peter F. Souza, Assistant Secretary

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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