Florida Department of State

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Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5926

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REGISTERED AGENT CHANGE

KOCH MEMBRANE SYSTEMS, INC.

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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, Plorida Status statement of change is submitted for a corporation organized under the laws of the State of Dolar in order to change its registered office or registered agent, or both, in the State of Florid	ware
I. The name of the corporation; Koch Membrane Systems, Inc.	
2. The principal office address; 4111 E. 37th Street North, Wighita, K5 67220	
3. The mailing address (if different): P. O. Box 2256, Wichita, KS 67201	
4. Data of incorporation/qualification: 5-12-1993 Document number: F93000002224	ξ
The name and street address of the current registered agent and registered office on file with the Florida Department of State;	2 6 9
CORPORATION SERVICE COMPANY	SEP
1201 Hays Street	P 23
Tallahassee pl 32301-2525	SSEP 23 PM ELAHASSEE, LLAHASSEE,
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	F STATE FLORIC
C T Corporation System	A
c/o C T Corporation System, 1200 South Fine Island Road	
(P.O. Box NOT stouptable)	
Plantation, Florida 33324	
The street address of its registered office and the street address of the business office of its registered will be identical. Such changes was enthodized by receiving duly adorted by the board of directors as by an add	
Such change was authorized by resolution duly adopted by its board of directors or by an official authorized by the food, or the conporation has been notified in writing of the change. By: Supplies of the directory of the change and the change and the change are the change are the change and the change are the chang	
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 complet of my duties, and I am jamiliar with and accept the obligation of my position as registered ag document is being filed merely to reflect a change in the registered office address, I hereby accompation has been notified in writing of this change.	
(Suprance of Rollanded Agend) Q-22-05	
If signing on behalf of an entity:	
M.S. Green, Asst Socretary, CT Corporation System	
(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 3231 CRZEO45 (8/05)	14

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