

F99000002339



ACCOUNT NO. : 072100000032

REFERENCE : 004839 4307439

AUTHORIZATION :

COST LIMIT : \$ 35.00

01 FEB 16 AM 11:35
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : February 14, 2001

ORDER TIME : 8:39 AM

ORDER NO. : 004839-010

CUSTOMER NO: 4307439

CUSTOMER: Justin T. Huang, Esq
Reed Smith LLP
2500 One Liberty Pl.
1650 Market Street
Philadelphia, PA 19103-7301

800003706928--5

CHANGE OF AGENT

NAME: OMPI COMPANY, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward

COULLETTE FEB 16 2001

**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, the undersigned corporation organized under the laws of the State of Massachusetts submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: OMPT Company, Inc.
2. The mailing address of the corporation is: 1629 Locust Street, Philadelphia, PA 19103
3. Date of incorporation/qualification: 5/4/99 Document number: F99000002339
4. The name and address of the current registered agent and office:

Natalia M. Powell
2290 Avenue L
Riviera Beach, FL 33404

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

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.

Peter D. Schreiber
(Signature of an officer, chairman or vice chairman of the board)

2/12/01
(Date)

Peter D. Schreiber, Clerk
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

By: Sylvia M. White
(Signature of Registered Agent)

2-14-01
(Date)

If signing on behalf of an entity:

Sylvia M. White
(Typed or Printed Name)

Authorized Representative
(Capacity)

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