

P11712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

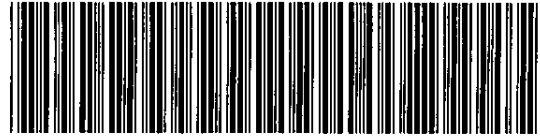
(Business Entity Name)

(Document Number)

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2008 MAR 13 AM 9:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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3/14/08

\*001789, 00524, 00611, 00671

## **Transammonia**

Transammonia, Inc.  
320 Park Avenue  
New York, NY 10022-6815  
United States of America

(212) 223-3200 Phone  
(212) 759-1410 Fax  
newyork@transammonia.com



February 14, 2008

Via Certified Mail, Return Receipt Requested

Secretary of State  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Statement of Change of Registered Office/Agent

Dear Sirs:

Enclosed is the executed form as well as your fee of \$35.00 to effect the above-referenced matter. Once filed, kindly return a stamped copy of the filing to me. I have enclosed a self-stamped return envelope for your convenience.

Thank you.

Very truly yours,

A handwritten signature in black ink that reads "Karol Silverman". The signature is written in a cursive, flowing style.

Karol Silverman  
Legal Assistant



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 20, 2008

Karol Silverman  
Transammonia, Inc.  
320 Park Avenue  
New York, NY 10022-6815

SUBJECT: TRANSAMMONIA, INC.  
Ref. Number: P11712

We have received your document for TRANSAMMONIA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please change the name in paragraph 5 to The Prentice Hall Corporation System. Please delete the corporation's name "Transammonia, Inc." from paragraph 6 and just list Paul Camporini as the registered agent.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey  
Regulatory Specialist II

Letter Number: 908A00010840

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Transammonia, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P11712

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Fred M. Lowenfels  
(Name of Contact Person)

Transammonia, Inc.  
(Firm/Company)

320 Park Avenue  
(Address)

New York, N.Y. 10022-6815  
(City/State and Zip Code)

For further information concerning this matter, please call:

Fred M. Lowenfels at (212) 223-3200  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## Transammonia

Transammonia, Inc.  
320 Park Avenue  
New York, NY 10022-6815  
United States of America

(212) 223-3200 Phone  
(212) 759-1410 Fax  
newyork@transammonia.com



March 5, 2008

Via Certified Mail/Return Receipt Requested

Secretary of State  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Dear Sirs:

Enclosed is our fully signed Statement of Change for Registered Office or Registered Agent or Both for Corporations.

For your convenience I have enclosed a copy of my previous letter and accompanying form (without our new registered agent's signature) and copy of our payment to you. Also enclosed is a self-stamped return envelope. After the filing is done, please send the confirmation filing back to me in the return envelope.

Thank you.

A handwritten signature in cursive script that reads "Karol Silverman".

Karol Silverman  
Legal Assistant

RECEIVED  
2008 MAR 13 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Transammonia, Inc.
2. The principal office address: 320 Park Avenue 10th floor, New York, N.Y. 10022-6815
3. The mailing address (if different):

4. Date of incorporation/qualification: Oct. 8, 1986 Document number: P11712

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

The Prentice Hall Corporation System
1201 Hays Street
Tallahassee, FL 32301

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

Paul Camporini,
4211 W. Boy Scout Blvd., Suite 600
(P.O. Box NOT acceptable)
Tampa, Florida 33607-5757

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

Fred M. Lowenfels, EVP & 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.

By: Signature of Registered Agent
Corporation Service Company

3/3/08
(Date)

If signing on behalf of an entity:

Paul Camporini
(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