## Pa5434

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ACCOUNT NO. : 072100000032 REFERENCE : 939076 4301677 AUTHORIZATION : COST LIMIT : \$ 35.00 ORDER DATE: June 7, 2007 ORDER TIME : 9:41 AM ORDER NO. : 939076-030 CUSTOMER NO: 4301677 CHANGE OF AGENT NAME: CARDO USA, INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX \_\_\_\_ PLAIN STAMPED COPY CONTACT PERSON: Amanda Roath

EXAMINER'S INITIALS:

## '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 Connecticut in order to change its resistered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CARDO USA INC.
2. The principal office address:  140 View Drive, Meridien, CT 06450
3. The mailing address (if different):
4. Date of incorporation/qualification: 07/27/1989 Document number: P25434
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Paul Robinson
111 Maritime Drive
Sanford, FL 32771
Sanford, FL 32771  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Corporation Service Company
Corporation Service Company
1201 Hays Street
(P.O. Box NOT acceptable)
Tallahassee, FL 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, or the corporation has been notified in writing of the change.
(Signature of an officer or director)  Wickael L. May tell  (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.
Corporation Service Company  (Date)
If signing on behalf of an entity:
Sylvia Queppet, Asst. VP
(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)