

August 24, , 2001

Secretary of State Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

400004558334--7

-08/27/01--01107--012 *****35.00 *****35.00

Re: J.F. ARIAS, S.A.

Dear Sirs:

We are enclosing our check #78093, in the amount of \$35.00 as payment for change of Registered Agent for the above referenced corporation.

Sincerely yours,

Consuelo Dausa Paralegal Clerk

MIA-44677-1

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SECRETARY OF STATE
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Miamì West Palm Beach Tallahassee Naples Key West London Caracas São Paulo Rio de Janeiro Santo Domingo

FATEMENT OF CHANGE OF REGISTERED OFFICE OF REGISTERED AGENT OR BOTH FOR CORPORATIONS

the undersigned corporation organized under the laws of the State of
the State of Florida. 1. The name of the corporation is:
2. The mailing address of the corporation is: P.O. Box 6683 Panama, Republica de Panama
3. Date of incorporation/qualification: 11/01/2000 Document number:00000000121
4. The name and address of the current registered agent and office:
VALDES_FAULI_ CORPORATE SERVICES, INC
2 S. Biscayne Blvd., Ste. # 3400
Miami, Florida 33131
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
RJVF CORPORATE SERVICES, INC.
200 South Biscayne Blvd., Suite # 4100
Miami, Florida 33131
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 authorized by the board.
~ Mianto (1120)
Senature of an officer, chairman or vice chairman of the board) (Dafe)
Juan F. Arias
(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.
(Signature of Pregistered Agent) (Dita)
(Signature of Registered Agent) (Date) If signing on behalf of an entity:
Raul J. Valdes-Fauli President
(Typed or Printed Name) (Capacity)

CR2E045(7/97)

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