

# 588830

Florida Department of State  
Division of Corporations  
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DIVISION OF CORPORATIONS

## REGISTERED AGENT CHANGE

CICORP - USI, INC.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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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, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CICORP US, Inc.
2. The principal office address: 8100 SW 10TH ST, SUITE 2000, PLANTATION FL 33324 US
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 10/1/78 Document number: 588830

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

Corporation Service Company

1201 HAYS STREET

TALLAHASSEE FL 32301-2525

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

C T Corporation System

c/o C T Corporation System

(P.O. Box or personal mailbox, NOT acceptable)

1200 Smith Pine Island Road, Plantation, Florida 33324

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]  
(Signature of President, Chairman of the Board or Vice Chairman of the Board)

Jill Krantz-Pallon, Assistant 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.

C T Corporation System  
[Signature]  
(Signature of Registered Agent)

December 27, 2004

(Print)  
**SHEILA CLARK**  
**Assistant Secretary**

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:  
DIVISION OF CORPORATIONS, P.O. BOX 6337, TALLAHASSEE, FL 32311

FORM 1004-03 C T System, Online

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