8/6282

A3	
KONICA MINOLTA	
KONICA MINOLTA GRAPHIC IMAGING U.S.A., INC. 71 Charles Street Glen Cove, NY 11542	
PICK-UP WAIT	MAIL MAIL
(Business Entity Name)
(Document Number)	
Certified Copies Certificates o	f Status
Special Instructions to Filing Officer:	
	i i

Office Use Only



500041162525

9

09/23/04--01023--003 **35.00

NA Change

04 SEP 23 THE ST

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 MEN GOEK
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: KONICA MINOLTA GRAPHIC INTERNATIONAL, INC.
2. The principal office address: 71 Charles Street
Glen Cove, New York 11542
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/31/1904 Document number: 816282
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
HOLBROOK, JEAN
1072 S. POWERLINE RD
DEERFIELD BEACH, FL 33442
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
PHIL FUSSELL
1732 S.W. 4th Court (P.O. Box NOT acceptable)
الله الله الله الله الله الله الله الله
FT. LAUDERDALE FL 33312
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) SpanISARE U/SH/MARA - See / TREA (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.
(Signature of Registered Agent) 7 September 1 (Date)
If signing on behalf of an entity:
(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