840939



ACCOUNT NO.

072100000032

REFERENCE :

279997

AUTHORIZATION

COST LIMIT :

\$ 35.00

ORDER DATE: November 1, 2001

ORDER TIME :

1:06 PM

ORDER NO. : 279997-015

CUSTOMER NO:

5157628

CUSTOMER: Ms. Mary Ellen Shepherd

Bowater Incorporated 55 East Camperdown Way

P.o. Box 1028

Greenville, SC 29602-1026

CHANGE OF AGENT

NAME:

BOWATER INCORPORATED

300004664519--9

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: ANGIE L. GLISAR

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

	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1500 ned corporation organized under the laws of the State of $_$ Delaware	8, Florida Statutes,
	following statement in order to change its registered office or registere	d agent, or both, in
1. The name of	of the corporation : BOWATER INCORPORATED	<u> </u>
2. The mailing	ng address of the corporation: 55 East Camperdown Way, Greenville,	SC 29602-1026
3. Date of inco	acorporation/qualification: 6/23/1978 Document number:	840939
4. The name ar	and address of the current registered agent and office:	
	C T Corporation System	,
	1200 South Pine Island Road	TAR
	Plantation, FL 33324	AR 6
5. The name an	and address of the new registered agent (if changed) and/or registered of (P. O. Box Not Acceptable)	fite if changed).
	Corporation Service Company	FC R M
	1201 Hays Street	2: 56 STAT
	Tallahassee, Florida 32301	D M D
The street addragent, as change	dress of its registered office and the street address of the business offic nged, will be identical.	e of its registered
Such change wauthorized by t	was authorized by resolution duly adopted by its board of directors or y the board.	by an officer so
(Signature	L C SL. are of an officer, chairman or vice chairman of the board) (Date of an officer, chairman or vice chairman of the board)	4 30, 200 l
Wendy Shiba, S	Secretary (Printed or typed name and title)	
Having been no corporation, I had been a life to the corporation of th		ove stated n this capacity. nd complete osition as
	BRIAN COURTNEY, ASST. V.P.	
	(Signature of Registered Agent) (Date)	·
If signing on behal	·	
Corporation Se	Service Company (Typed or Printed Name) (Capacity)	<u> </u>
•	(Capacity)	

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

CR2E045(9/00)