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Division of Corporations

849398 REF NO.

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Florida Department of State
Division of Corporations
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From:
Account Name : SHUTTS & BOWEN, LLP
Account Number : 076447000313
Phone : (305) 358-6300
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DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

DRESDNER BANK LATEINAMERIKA AKTIENGESELLSCHAFT

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R-A-Change

C. Coulliette JUN 16 2005

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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 "OC" in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DRESDNER BANK LATINAMERIKA AKTIENGESELLSCHAFT
 Cross Reference: DRESDNER BANK LATIN AMERICA INC.
2. The principal office address: 801 Brickell Avenue, Suite 700,
Miami, Florida 33131-4945
3. The mailing address (if different): Same

4. Date of incorporation/qualification: 6/11/1981 Document number: 849398

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

Andreas Ehlebracht
801 Brickell Avenue, Suite 700
Miami, Florida 33131-4945

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

Corporation Company of Miami
201 S. Biscayne Blvd., Suite 1600 (BA)
 (P.O. Box NOT acceptable)
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 so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
 (Signature of an officer or director)

JORCH M. WEICHBRODT, GENERAL MANAGER
 (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]
 (Signature of Registered Agent)

6-15-05
 (Date)

If signing on behalf of an entity:

Felicia Hickey Asst. Secretary of
 (Typed or Printed Name) Corporation Company of Miami

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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