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Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6380

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023

Phone : (850)222-1092

Fax Number

: (850)878-5926



REGISTERED AGENT CHANGE

ABN AMRO BANK N.V.

| Certificate of Status | 0 |
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| Certified Copy | 0 |
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Corporate Filing Menu

Help

G. Gouillette FEB 2 1 2008

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

| statement of cl | he provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida change is submitted for a corporation organized under the laws of the State of eder to change its registered office or registered agent, or both, in the State of t | Netherlands |
|--------------------------------|---|-------------------------------------|
| 1. The name of | of the corporation: ABN AMRO Bank N.V. | |
| | nal office address: 55 E. 52 St. 10th Floor NY NY 10055 | |
| 3. The mailing | g address (if different): | |
| 4. Date of inco | orporation/qualification: 7/8/1981 Document number: 849653 | |
| | and street address of the current registered agent and registered office on file wo | ith the |
| | Roberto D. Villeyaa | <u>_</u> |
| | 200 S. Biscayne Blvd., 22nd Floor | |
| | Miaini, FL 33131 | TAS 6 |
| 6. The name ar (if changed) | nd street address of the new registered agent (il changed) and for registered of): CT Corporation System | 08 FEB 20 SECRETARY ALLAHASSE |
| | c/o C T Corporation System, 1200 South Pine Island Road | |
| | (P.O. Box NOT acceptable) | - 100 ST ST |
| • | Plantation, Florida 33324 | 30 ATE)KID |
| The street add | tress of its registered office and the street address of the business office of i | is registered agent, |
| Such change v | was authorized by resolution duly adopted by its board of directors or by at the board, or the corporation has been notified in writing of the change. | n officer so |
| | Mark Burster | in officer |
| • • | pt the appointment as registered agent and agree to act in this capacity: e to comply with the provisions of all statutes relative to the proper and co- and I am familiar with and accept the obligation of my position as register- teing filed merely to reflect a change in the registered office address. I here as been notified in writing of this change. | • |
| Ву: | Corporation System 8/20/2008 | |
| lf signing on b | SEANIE BRITANI SECRET | |
| | (Typical of Prograd 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 CR26045 (S'05)