FILED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Sep 04, 2003 8:00 am Secretary of State 851746 DOCUMENT # 09-04-2003 90064 031 ***558.75 1. Entity Name CREDIT LYONNAIS, S.A. Principal Place of Business Mailing Address GENERAL COUNSEL 19 BLVD.. DES ITALIENS 1301 AVE. OF THE AMERICAS **PARIS FR 10019** NEW YORK NY 10019 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FE! Number Applied For 13-2674617 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change ¥☐ Addition TITLE Delete TITLE PEYRELEVADE, JEAN Carron, Rene NAME 19 BLVD. DES ITALIENS STREET ADDRESS 91-93 Boulevard Pasteur STREET ADORESS PARIS, FRANCE CITY-ST-ZIP CITY-ST-ZIP Paris, France 75015 TITLE ☐ Delete TITLE Change x Addition MIGNUCCI, BERNARD NAME NAME Laurent, Jean 19 BLVD DES ITALIENS STREET ADDRESS STREET ADDRESS 91-93 Boulevard Pasteur PARIS FR 75002 CITY-ST-ZIP CITY-ST-ZIP Paris, France 75015 TITLE TITLE □ Change Addition St Delete BUE, MARC NAME NAME Bastide, Pierre 19 BLVD DES ITALIENS STREET ADDRESS STREET ADDRESS 3 Avenue de la Liberation PARIS FR CITY-ST-ZIP CITY-ST-ZIP 63045 Clermont Ferrand (France) TITLE TITLE X Addition $^{\mathrm{D}}$ Dupuy, **N**oel 😾 Delete JEAN-PHILIPPE, COTIS NAME NAME 19 BLVD. DES ITALIENS 91-93 Boulevard Pasteur STREET ADDRESS STREET ADDRESS PARIS FR 75002 CITY-ST-ZIP CITY-ST-ZIP Paris, France 75015 TITLE TITLE Change Addition Delete DE LA MARTINIERE, GERARD Breiphol, Diethart NAME 19 BLVD. DES ITALIENS Koniginstrasse 28 STREET ADDRESS STREET ADDRESS PARIS, FRANCE CITY-ST-ZIP CITY-ST-ZIP 80802 Munchen (Germany) TITLE Delete TITLE ☐ Change Addition Pauget, Georges NAME NAME STREET ADDRESS 91-93 Boulevard Pasteur STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Paris, France 75015

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Attachment

1. Entity Nar CREDIT I			(46)						(3VII	1010	78		
Principal Place of Business 19 BLVD DES ITALIENS PARIS FR 10019 US			GENER 1301 A	Mailing Address GENERAL COUNSEL 1301 AVE. OF THE AMERICAS NEW YORK NY 10019				80143670						
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Suite, Apt		· · ·		Suite, Apt, #, etc. City & State				4. FEI Number 42 0074647 Applied For						
City & State				Zip Cour				· FEIIV	13-20/401/				ot Applicable	
Zip Country 6. Name and Address of Current				A ALLES	Coun			5. Certificate of Status Desired S8.75 Additional Fee Required 7. Name and Address of New Registered Agent					iditional ed	
			ent Registered	Адепт		Name	• •	7. Wante	and Addre	SS OF INEW I	tegistered	Agent		
	ation ser Ys street	VICE COMPANY					Street Address (P.O. Box Number is Not Acceptable)							
TALLAHA	SSEE FL 3	2301-2525		•			.City							
		y submits this statemen							Jamah Carab		FL	<u>- L</u>		
After Se	ptember 10	PEE IS \$550.00 2003 Fee will be \$ Florida Departmen OFFICERS A		S	11.					Contributio	on. [00 May Be ed to Fees	
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of the cor	on this report poration or the or on an atta	a information supplied t or supplemental repo le receiver or trustee el chment with an addres	rt is true and ac npowered to ex	curate and that mecute this report	ıy signatı	ure shall hav	e the sar	me legal	effect as if m	iade under i	hath: that I :	am an officei	or director	
		SIGNATURE AND TYPED	OR PRINTED NAME	DF SIGNING OFFICER	оя віявсто	OA .			Da	te	-	Daytime Phone #.		