



A00000001333

ACCOUNT NO. : 072100000032

REFERENCE : 147499 4302312

AUTHORIZATION : *Patricia Pignato*

COST LIMIT : \$ 87.50

ORDER DATE : October 23, 2001

ORDER TIME : 10:15 AM

ORDER NO. : 147499-040

CUSTOMER NO: 4302312

CUSTOMER: Jacob A. Pollack, Esq
Stroock & Stroock & Lavan
180 Maiden Lane

New York, NY 10038

A-1333

FILED
01 OCT 25 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CHANGE OF AGENT

NAME: ORION ATLANTIC, LTD.

*Please file and
Please stamp the time in
One minute after the
file 1st.*

300004653513--1

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _____ CERTIFIED COPY

CONTACT PERSON: Susie Knight -- EXT# 1156

EXAMINER: _____

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TALLAHASSEE, FLORIDA

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 or 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Orion Atlantic, Ltd.
Name of the limited partnership

2. August 28, 2001
Date of filing/registration in Florida

3. A00000001333
Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

K. Lawrence Gragg
Name
White & Case LLP
200 S. Biscayne Boulevard, Suite 4900
Address
Miami, FL 33131
City, State and Zip

5. The name and address of the new registered agent and/or office:

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box not acceptable)
Tallahassee, FL 32301
City, State and Zip

6. Such change(s) was/were authorized by the general partners.

By: ORION ATLANTIC LLC General Partner

Name: Michael Gluckman
Title: Vice President

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 obligations 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 limited partnership has been notified in writing of this change.

Corporation Service Company
Laura R. Dunlap
Signature of Registered Agent
Laura R. Dunlap
as its agent

**Make checks payable to Florida Department of State and mail to:
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00**

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