

## Florida Department of State

Division of Corporations Public Access System

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## REGISTERED AGENT CHANGE

MUREX N.A., LTD.

Certificate of Status	0	7
Certified Copy	0	7
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Estimated Charge	\$25.00	725

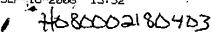
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## LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of sections 620.105 and 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. Murex N.A., LTD.			
. ,	Nar	ne of the limited partnership	
2. 10/16/2007		3. B07000000314	
Date of filing/registr	ation in Florida	ion in Florida Document number assigned	
4. The name of the regis	tered agent and the	registered office address as shown on t	the records of the Florida
Department of State:	CORPORATION	N SERVICE COMPANY	
	1201 HAYS ST	Name	ZIII
-		Address	ID SE
TALLAHASSEE FL 32301		풍뜨 '당	
•		City, State and Zip	H9 AR) SSI
5. The name and address of the new registered agent and/or office:		日	
Business Filings Incorporated		7: 5 DATE ORICE	
_		Name	<del>-</del> 59
12	03 Governors S	quare Blvd, Suite 101	•
_	Florida street s	address (P.O. Box not acceptable)	<del></del>
Ta	liahassee	<sub>FL</sub> 32301-2960	
		City, State and Zip	
6. Such change(s) was/w	ere authorized by t	he general partners.	1
Signature of General Partner	Batel	Richard J. Bartel, CFO of I General Partner	Murex Management, Inc.,
with the provisions of al	ll statutes relative to the obligations of m ge in the registered	l agent and agree to act in this capacity, o the proper and complete performancy position as registered agent. Or, if the office address, I hereby confirm that the	ce of my duties, and I am
	<u></u>		
Signature of Registered Agent	Merk Williams, A	VP, Business Filings Incorporated	
Mak	e checks payable to	Florida Department of State and m	ail to:

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00

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