REFERENCE

: 872102 4731030

AUTHORIZATION :

COST LIMIT

ORDER DATE: October 23, 2000

ORDER TIME : 10:25 AM

ORDER NO. : 872102-590

CUSTOMER NO: 4731030

CUSTOMER: Ms. Kimberley Smith-o'byrne

Pmc Inc.

12243 Branford Street

Sun Valley, CA 913520000 ...

CHANGE OF AGENT

NAME: GUSMER CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward

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

	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508,	Florida Statutes,
submits the foll	ed corporation organized under the laws of the State of Delaware  llowing statement in order to change its registered office or registered office.	agent, or both, in
the State of Flor	of the corporation is: Gusmer Corporation	
I. The hame of	of the corporation to:	
2. The mailing	g address of the corporation is:	
12243 Bra	anford Street, Sun Valley, CA 91353	
3. Date of incom	orporation/qualification: 2/7/00 Document number:	0000000674
4. The name an	and address of the current registered agent and office:	-
	CT Corporation System	·9
	1200 South Pine Island Road	ří <b>o</b> Cra o
	Plantation, FL 33324	
5. The name ar	and address of the new registered agent and office: (P. O. Box Not Accept	able) 🖰 📶
	Corporation Service Company	<u>~</u> ≥ ∪
	1201 Hays Street	A 33
	Tallahassee, Florida 32301	er e
agent, as chang	dress of its registered office and the street address of the business office aged, will be identical.	
Such change wauthorized by t	was authorized by resolution duly adopted by its board of directors or l	by an officer so
- (	() Cu	-00
(Signatu	ture of an officer, chairman or vice chairman of the board) (De	ite)
T.C. Cheong,	Asst. Secretary	e veg
	(Printed or typed name and title)	stated
corporation, I I further agree performance o	named as registered agent and to accept service of process for the above so I hereby accept the appointment as registered agent and agree to act in the set to comply with the provisions of all statutes relative to the proper and compound the set of my duties, and I am familiar with and accept the obligation of my positions.	omplete
registered agei	orail Let 26, 20	<i>o</i>
<u> </u>	(Signature of Registered Agent) (Date)	
If signing on behal	alf of an entity:	
Bobbie J. Hal	Asst. V.P.  (Capacity)	
-	(Typed or Printed Name) (Capacity)	

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