

Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name

: CORPORATION SERVICE COMPANY

Account Number : 120000000195 (850) 521-1000 Phone

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DIVISION OF CORPORATIONS

## REGISTERED AGENT CHANGE

HCM USA, INC.

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4/27/2004

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STATEMENT OF CHANGE OF REGISTERED COR	ED OFFICE OR REGISTERED AGENT OR BOTH FOR RPOBATIONS
	0502, 607.1508, or 617.1508, Florida Statutes, this statement of the laws of the State of in order to the State of Florida.
). The name of the corporation: HCM USA, INC.	
2. The principal office address:	
1515 S. Federal Highway, Suite 401, B	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 03/33/2000	Document number: F00000001818
<ol> <li>The name and street address of the current registered a Fiorida Department of State:</li> </ol>	agent and registered office on file with the
Angell Corporate Services, 1	Inc.
One North Clematis Street, S	Suite 400
West Palm Beach, FL 33401-00	999
<ol><li>The name and street address of the new registered ages (if changed);</li></ol>	ent (if changed) and /or registered office
Corporation Service Company	To the
1201 Hays Street	2
(P.O. Box or personal s	mailbox NOT acceptable)
Tallahassea, FL 32301	
	t address of the business office of its registered agent, as
Such change was authorized by resolution duly adopted the board, or the corporation has been notified in writin	ed by its board of directors or by an officer so authorized by ng of the change.
Stephine of an officer or director)	David O'Toole, Vice President (Frankling Speciality and Unit)
ozen ngupen in writing py inis counge.	nd agree to act in this capacity, tudes relative to the proper and complete performance of my in of my position as registered agent. Or, if this document is office address, I hereby confirm that the corporation has
Corporation Serviced Company By: DUTY Juniform (Signature Registered Agent)	<u>Uprl 22, 2004</u>
if signing on behalf of an entity:	
Dorothy Tenshaw	Assistant Vice President
(Typed or Printed Name)	(Capacity)

(Typed or Printed Name)