

F01000002053

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM
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Phone : (850) 222-1092
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REGISTERED AGENT CHANGE

BRIDGECOM INTERNATIONAL, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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TS
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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of DE in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Bridgecom International, Inc.
2. The principal office address: 800 Westchester Avenue, Suite N501 Rye Brook, NY 10573
3. The mailing address (if different): 2100 Renaissance Boulevard, King of Prussia, PA 19406
4. Date of incorporation/qualification: 04/11/2001 Document number: F01000002053
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

NRAI Services Inc.

2731 Executive Park Drive, Suite 4

Weston FL 33331

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System


c/o C T Corporation System, 1200 South Pine Island Road

(P.O. Box NOT acceptable)

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.


(Signature of an officer or director)


(Printed or typed name and title) **RONALD C. HUNTER, EVP**

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 obligation 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 corporation has been notified in writing of this change.

C T Corporation System

By: 
(Signature of Registered Agent)

April 25, 2008
(Date)

If signing on behalf of an entity:

ANN J. WILLIAMS

Assistant Vice President

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)