## F010000005487

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SECRETARY OF STATE
AFFARASSEE, FLORIDA

ADR 1709



ACCOUNT NO. : 072100000032

REFERENCE: 848400

AUTHORIZATION : Sprelle le man

COST LIMIT :

ORDER DATE: January 6, 2009

ORDER TIME : 10:49 AM

ORDER NO. : 848400-080

CUSTOMER NO: 5059544

## CHANGE OF AGENT

NAME: AMGEN USA INC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX \_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Matthew Young

EXAMINER'S INITIALS:

## 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 Delaware in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: AMGEN USA INC.	
2. The principal office address: One Amgen Center Drive	
Thousand Oaks, FL 91320-1799	
3. The mailing address (if different): Tax Department P O Box 19027, Newbury Park, CA 91319-9027	
4. Date of incorporation/qualification: 10/22/2001 Document number: F01000005487	-
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
C T Corporation System	
1200 South Pine Island Road	7
Plantation, FL 33324	FI
1200 South Pine Island Road  Plantation, FL 33324  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Corporation Service Company	
Corporation Service Company	
1201 Hays Street	
(P.O. Box NOT acceptable)	
Tallahassee, FL 32301	
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.	
Maureen Cullen, Attorney in Fact (Printed or typed name and title)	
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.  Corporation Servies Company	:
By: My Chile K. Johnson 1-6-09 (Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
Michelle R. Vannoy, Asst. V.P.	
(Typed or Printed Name)	

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

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