## F02000004260

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PICK-UP WAIT MAIL				
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(Document Number)				
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C. Coulliste AUG U 5 2005



ACCOUNT NO. : 072100000032

REFERENCE : 521314 7110113

AUTHORIZATION

COST LIMIT : \$ 35.00 '

ORDER DATE: August 3, 2005

ORDER TIME : 10:21 AM

ORDER NO. : 521314-100

CUSTOMER NO: 7110113

CUSTOMER: Ms. Cynthia Rubio

Csx Corporation

500 Water Street, C160

Jacksonville, FL 32202

CHANGE OF AGENT

NAME: CSX HOLDING BENEFITS COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Amanda Haddan

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

statement of ch	nange is submitted for a corporati	617.0502, 607.1508, or 617.1508, I on organized under the laws of the S or registered agent, or both, in the S	State ofDelaware
1 The name of	f the corporation: CSX HOLDING	BENEFITS COMPANY	
2. The principa	al office address: 500 Water S	Street, Jacksonville, FL 3	2082
3. The mailing	address (if different):		
4. Date of inco	rporation/qualification: 08/21/	2002 Document number: F	02000004260
5. The name ar		ristered agent and registered office of	
	C T Corporation System		
	1200 South Pine Island	Road	
	Plantation, FL 33324		05 AUI SECRE ALLAP
6. The name ar (if changed)	nd street address of the new register:	ered agent (if changed) and /or regist	tered office FILE
	Corporation Service Cor	mpany	
	1201 Hays Street		₩ <b></b>
	(P.O. Box NOT	'acceptable)	<del></del> •
	Tallahassee, FL 32301		
The street add as changed wi	ress of its registered office and the identical.	ne street address of the business of	fice of its registered agent,
Such change vauthorized by	vas authorized by resolution duly the board, or the corporation has	adopted by its board of directors of been notified in writing of the cha	or by an officer so nge.
/\/\	un - Cull	Maureen Cullen, Atto Gordon F. Bailey, II (Printed or typed	I, Asst. Secretary
согроганов не	is veen notijiea in writing oj inis	agent and agree to act in this capac fall statutes relative to the proper t the obligation of my position as re age in the registered office address change.	city and complete performance egistered agent. Or, if this , I hereby confirm that the
By -//	ion Service Company	08/02/2005	
	ignature of Registered Agent)	(Date)	)
lf signing on b	ehalf of an entity:		
Elizabeth A	. Dawson, Asst. Vice Pre	s.	

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

(Typed or Printed Name)