

F02000005522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800185145318

09/27/10--01063--002 \*\*35.00

FILED  
10 SEP 27 AM 10:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*RAM  
9/29/10*

**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 New York in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Coface North America, Inc.
2. The principal office address: 50 Millstone Road. Building 100, Suite 360  
East Windsor, New Jersey 08520
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 11/01/2002 Document number: F02000005522

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System  
1200 South Pine Island Road  
Plantation, FL 33324

FILED  
10 SEP 27 AM 10: 52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

NRAI Services, Inc.  
2731 Executive Park Drive, Suite 4  
(P.O. Box NOT acceptable)  
Weston, FL 33331

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]  
(Signature of an officer or director)

Friedrich von Krusenstiern, Secretary  
(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.*

[Signature]  
(Signature of Registered Agent)

9/23/10  
(Date)

If signing on behalf of an entity:

Peter F. Souza, Assistant Secretary  
(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