

Division of Corporations Public Access System

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REGISTERED AGENT CHANGE

L-3 COMMUNICATIONS MOBILE-VISION, INC.

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tnge is submitted for a corporation organized under the laws of the State of <u>NEW JESSEY</u> or to change its registered affice or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: L-3 Communications Mobile-Vision, Inc.
2. The principal	office address: 90 Fanny Rd Boonton, NT 07005
3. The mailing a	address (if different): c/o L-3 Communications Corporation 600 3rd Ave, New York, NY 10016
4. Date of incorp	poration/qualification: 6/12/03 Document number: F03000002928
	d street address of the current registered agent and registered office on file with the riment of State:
	NRAI SERVICES, INC. 2731
	EXECUTIVE PARK DRIVE SUITE 4 WESTON FL 33331
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	CT Corporation System 2
	c/o C T Corporation System, 1200 South Pine Island Road
	(P.O. Box NOT acceptable) Plantation, Florida 33324
-	ass of its registered office and the street address of the business office of its registered agent, be identical.  as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
By: <b>Unit</b>	Watter Horetsky Assistant Secret
hereby accept further agree to if my duties, and locument is bein corporation has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performance at I am familiar with and accept the obligation of my position as registered agent. Or, if this ang filed merely to reflect a change in the registered affice address, I hereby confirm that the specified in writing of this change.
	nature of Registered Agent) (Date)
f signing on bet CONNIE DR SPECIAL ASS	half of an entity:
	* * * FILING PEE: \$35.00 * * *
Ma	MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FL006 - 09/14/2005 CT System Online

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