F03000005891

(Re	equestor's Name)	
(Ac	idress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	Isiness Entity Name	e)
(Document Number)		
Certified Copies	_ Certificates.c	of Status
Special Instructions to	Filing Officer:	

Office Use Only



500036237795

Change

RECEIVED

OLJUN 29 PM 2: 48

ENVISION THE CONTINUE

ENVISION THE CON

100 pm 6 /29/04



ACCOUNT NO. : 072100000032

REFERENCE : 777169

AUTHORIZATION : Plant

7425306

COST LIMIT : \$ 35.00

ORDER DATE: June 25, 2004

ORDER TIME : 1:16 PM

ORDER NO. : 777169-015

CUSTOMER NO: 7425306

CUSTOMER: Ms. Valerie Vito

Potash Corporation

Suite 400

1101 Skokie Blvd.

Northbrook, IL 60062

CHANGE OF AGENT

NAME: PCS ADMINISTRATION (USA), INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Sara Lea

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

Pursuant to the	provisions of sections 607.0502, 617.0502, 607.15	08, or 617.1508, Florida Statutes, this s	tatement of
change is subm	itted for a corporation organized under the laws of	the State of Delaware	in order
to change its re	gistered office or registered agent, or both, in the S	tate of Florida.	
1. The name of	the corporation: PCS ADMINISTRATION (USA)	, INC.	·_
2. The principa	office address: 1101 Skokie Boulevard, S	te. 400, Northbrook, IL 6006	2
3. The mailing	address (if different):		;
4. Date of incor	poration/qualification: November 20, 2003 Do	cument number: F03000005891	
	d street address of the current registered agent and artment of State:	registered office on file with the	
	C T Corporation System	<u>⊋</u> ∠ 2,	
	1200 South Pine Island Road	LANE JUN	77)
	Plantation, FL 33324	1.29	
6. The name an (if changed):	d street address of the new registered agent (if chan	ORD 13.41	Ü,
	1201 Hays Street		
	(P.O. Box or personal mailbox NOT	acceptable)	•
	Tallahassee, FL 32301	· · · · · · · · · · · · · · · · · · ·	
The street addr	ess of its registered office and the street address of identical.	of the business office of its registered a	gent, as
	as authorized by resolution duly adopted by its be corporation has been notified in writing of the		
Mai	Signature of an officer or director)	Maureen Cullen, Attorney in (Pfinted or typed name and title)	Fact
duties, and I at being filed mer been notified it	t the appointment as registered agent and agree to to comply with the provisions of all statutes relain familiar with and accept the obligation of my prely to reflect a change in the registered office addrivering of this change.	to act in this capacity. The complete perform the complete performance the comple	nance of my document is ation has
By: AMII	Service Company	June 23, 2004	
	(Signature of Registered Agent)	(Date)	
If sighing on b	ehalf of an entity:		
Jacqueline		Asst. Vice President	
	(Typed or Printed Name)	(Capacity)	

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