Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To;

Division of Corporations

Fax Number

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From:

Account Name : CORPDIRECT AGENTS, INC.

Account Number : 110450000714

: (850)222-1173

Fax Number

: (850)224-1640

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE GHM (USA), INC.

| Certificate of Status | 0 |
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To: FL SOS Subject: Change of agent filing

CR2E045 (8/05)

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

| statement of chan | rovisions of sections 607.0302, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of DELAWARE to change its registered office or registered agent, or both, in the State of Florida. |
|-------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| . 1. The name of the | ne corporation: GHM (USA), INC. |
| | office address: 2001 COLLINS AVE, MIAMI BEACH FL 33139 |
| 3. The mailing ad | Idress (if different): |
| 4. Date of incorp | oration/qualification: 12/09/2004 Document number: F04000006946 |
| 5. The name and Florida Depart | street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned) |
| | FLORES, JOSE |
| | 2001 COLLINS AVE |
| · | MIAMI BEACH FL 33139 US |
| 6. The name and (if changed): | street address of the new registered agent (if changed) and /or registered office |
| , | CORPDIRECT AGENTS, INC. |
| | 515 EAST PARK AVENUE |
| | TALLAHASSEE FL 32301 US |
| | as of its registered office and the street address of the business office of its registered agent, |
| Such change wa authorized by th | is authorized by resolution duly adopted by its board of directors or by an officer so eboard for the corporation has been notified in writing of the change. |
| | Hans Jenni, President Frinted or typed name and fills |
| I hereby accept to a further agree to of my dulles, and document is being corporation has | the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance of an familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address. I hereby confirm that the been notified in writing of this change. |
| Mic | chele Holds 82410 |
| If signing on bel | half of an entity: |
| | HOLDEN, ASST SECT |
| • | * * * FTLING FRE: \$35.00 * * * |

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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