F06000005038

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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SECRETARY OF STATE
ALL AHASSEE, FLORIDA

R.A. Change C.COULLIETTE

JUL # 9 2309

EXAMINER



Statement of Change of Registered Office or Registered Agent or Both for Corporations

Capitol Corporate Services, Inc.

PO Box 1831 Austin, TX 78767

Phone: 800-345-4647 Fax: 800-432-3622 regagent@capitolservices.com

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 DATE: STATE: 7/2/2009 FLORIDA

REP UNIT: THER

THERMO ASSET MANAGEMENT

SERVICES INC.

Enclosed for filing please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above referenced name, which is to be filed in your office. Enclosed is check #16556 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Change of Agent Section of the Registered Agent Department.



COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	THERMO ASSET MANAGEME	NT SERVICES INC.				
	(Name of Corpo	oration)				
DOCUMENT	NUMBER: <u>F06000005038</u>					
The enclosed S	tatement of Change of Registered Office/A	gent and fee are submitted for filing.				
Please return al	l correspondence concerning this matter to	the following:				
	Myra Hom	ner				
	(Name of Contac	t Person)				
Capitol Corporate Services, Inc.						
	(Firm/Comp	any)				
	800 Brazos, Suite 400					
	(Address	5)				
Austin, Texas 78701 (City/State and Zip Code)						
	•	•				
For further info	ormation concerning this matter, please call:					
	Myra Homer (Name of Contact Person)	at (<u>800</u>) <u>345-4647</u> (Area Code & Daytime Telephone Number)				
Enclosed is a \$	35.00 check made payable to the Departme	nt of State.				
	Mailing Address: Amendment Section	Street Address: Amendment Section				
	Division of Corporations	Division of Corporations				
	P.O. Box 6327	Clifton Building				
	Tallahassee, FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.05 nge is submitted for a corpor r to change its registered offi	ation organize	d under the laws o	f the State of _	<u>DELAWARE</u>
1. The name of t	he corporation: THE	RMO ASS	ET MANAGE	MENT SE	RVICES INC.
2. The principal	office address: 120 BISHO	PS WAY, BRO	OOKFIELD, WI	<u>53008-0951</u>	
3. The mailing a	ddress (if different): 81 WYI	MAN STREE	T, WALTHAM, N	MA 02454	
4. Date of incorp	poration/qualification: 7/31/2	2006	Document num	ber: <u>F06000</u>	005038
	street address of the current tment of State:	registered ager	nt and registered or	ffice on file w	ith the
	CT CORPORATION SY	STEM			
	1200 SOUTH PINE ISLA	AND ROAD			
	PLANTATION FL 33324	4		·	OS JU
6. The name and (if changed):	street address of the new reg	gistered agent (if changed) and /o	r registered of	SEX .
	Capitol Corporate Service	es, Inc.			E P S
	155 Office Plaza Drive, S	Suite A NOT acceptable)			34 TATE ORIDA
	Tallahassee		Florida	32301	_
The street address changed will	ess of its registered office and be identical.	nd the street ad	dress of the busin	ess office of	its registered agent,
	as authorized by resolution one board, or the corporation				
Mun	ſ		Myra Homer, At		ct
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as register to comply with the provision d I am familiar with and ac ng filed merely to reflect a c been notified in writing of	red agent and one of all statute cept the obligation of the his change in the this change.	agree to act in thi is relative to the p ition of my position registered office a	s capacity. proper and co on as register ddress, I hero	mplete performance ed agent. Or, if this eby confirm that the
Cayl	enature of Registered Agent)		July	$\frac{2}{2}$)9
If signing on be	half of an entity:			•	

Gayle Windle, Asst. Secretary on Behalf of Capitol Corporate Services, Inc.
(Typed or Printed Name)

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

SPECIAL POWER OF ATTORNEY

Seth Hoogasian, a duly authorized officer and/or director of the entities listed on Exhibit A hereto (the "Entities") does hereby make, constitute, and appoint Capitol Services, Inc., Capitol Corporate Services, Inc. and Capitol Document Services, Inc. and each duly authorized representative of such entities, including without limitation Ms. Myra Homer and Ms. Delanie Case, as his true and lawful attorneys-in-fact with full right, power and authority for him, as an authorized officer or manager of the Entities, in his name, place and stead to prepare, execute, acknowledge, and file or to cause to be prepared, executed, acknowledged, and filed, any and all documents and forms as may be necessary or appropriate to be filed by the Entities or on their behalf with any state agency in order to effectuate a change in the Entities' registered agent to Capitol Services, Inc., Capitol Corporate Services, Inc. or Capitol Document Services, Inc., as applicable.

GIVING AND GRANTING to said attorneys-in-fact full power and authority to do and perform every act necessary or appropriate to be done in the exercise of the foregoing power as fully as Seth Hoogasian, a duly authorized officer or director of the Entities, could do if personally present and acting, with full power of substitution and resubstitution, hereby ratifying, confirming, and approving all that said attorneys-in-fact shall lawfully do or cause to be done by virtue hereof.

This Special Power of Attorney shall be effective as of the date set forth below and shall continue in effect until revoked by Seth Hoogasian by written notice to said attorneys-infact.

IN WITNESS WHEREOF, Seth Hoogasian has set his hand this $\frac{160}{100}$ day of June, 2009.

Seth Hoogasian

Director or President