

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F07000003259

FILED
Dec 16, 2008
Secretary of State

Entity Name: EDB BUSINESS PARTNER AMERICAS, INC.

Current Principal Place of Business:

C/O CSC
2711 CENTERVILLE ROAD #400
WILMINGTON, DE 19808

New Principal Place of Business:

Current Mailing Address:

801 INTERNATIONAL DRIVE
SUITE 200
LINTHICUM, MD 21090

New Mailing Address:

10002 PRINCESS PALM AVENUE
SUITE 106
TAMPA, FL 33619 US

FEI Number: 20-4952478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ALLISON QUIGLEY

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GORBITZ, MARIANNE G
Address: DRAMMENSVEIEN 134, BUILDING 5
City-St-Zip: 0277 OSLO, NORWAY,

Title: D () Delete
Name: LANGSRUD, JOHNNY N
Address: DRAMMENSVEIEN 134, BUILDING 5
City-St-Zip: 0277 OSLO, NORWAY,

Title: P () Delete
Name: BOSTIC, ERIC
Address: 100 NORTH TAMPA STREET #3200
City-St-Zip: TAMPA, FL 33602

Title: V () Delete
Name: WALTON, VICTORIA
Address: 801 INTERNATIONAL DRIVE #200
City-St-Zip: LINTHICUM, MD 21090

Title: ST (X) Delete
Name: ALAMO, JUAN
Address: 100 NORTH TAMPA STREET #3200
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: HIBBERT, KEDENE
Address: 10002 PRINCESS PALM AVENUE, STE 106
City-St-Zip: TAMPA, FL 33619

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERIC J. BOSTIC

P

12/16/2008

Electronic Signature of Signing Officer or Director

Date