

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number: I20000000195 Phone : (850)521-1000

: (850)558-1575 Fax Number





REGISTERED AGENT CHANGE

TRANSURBAN (USA) INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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Corporate Filing Menu

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.	
<u> </u>	
1. The name of the corporation: TRANSURBAN (USA) INC. 2. The principal office address: 565 Fifth Avenue 18th Floor New York NY 10017	
3. The mailing address (if different):	_
4. Date of incorporation/qualification: 5/14/2008 Document number: F08000002195	
The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
C T Corporation System	
1200 South Pine Island Road	<u> </u>
Plantation, FL 33324	5.5
Plantation, FL 33324 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	VISION
Corporation Service Company	17
1201 Hays Street	Ž
(P.O. Box NOT acceptable)	, .
Tallahassee, FL 32301	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by production duly adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.	
(Signature of the officer or director) (Signature of the officer or director) (Printed or typed matrix and little)	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
Comporation Service Company By: 100 en (2)0000 3/30/2009 (Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
Doreen Wallace	
Assistant Vigo President	
* * * FILING FEE: \$35.00 * * *	
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)	

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