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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

R.A. Charge

JUN 2 6 2001



ACCOUNT NO. : 072100000032 REFERENCE: 569583 AUTHORIZATION COST LIMIT ORDER DATE: May 13, 2008 ORDER TIME: 9:35 AM ORDER NO. : 569583-060 CUSTOMER NO: 4381522 CHANGE OF AGENT NAME: STANTEC CONSULTING CORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Troy Todd

EXAMINER'S INITIALS:

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

statement of che	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S ange is submitted for a corporation organized under the laws of the State of \underline{L} ler to change its registered office or registered agent, or both, in the State of Fl	Delaware	
1. The name of	the corporation: SECOR INTERNATIONAL INCORPORATIONAL	ED	
	office address: 12034 134th Court, N.E., Suite 102, Redmond		
3. The mailing a	address (if different): P O Box 230, Redmond, WA 98073		<u> </u>
4. Date of incor	rporation/qualification: 08/20/1993 Document number: F93000	0003818	
	d street address of the current registered agent and registered office on file with	h the	
	C T Corporation System		
	1200 South Pine Island Road		
	Plantation, FL 33324		
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offic	08 SEC	
	Corporation Service Company	JUN CRET	.5.7
	1201 Hays Street	TAR ASS	
	(P.O. Box NOT acceptable)	Y OF	T
,	Tallahassee, FL 32301	FS = F	<u>'</u>
as changed will			
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an one board, or the corporation has been notified in writing of the change.	officer so	
<u> </u>	Kenna Graham, Cor (Printed or typed name and til	porate Cour	13e
I hereby accept I further agree of of my duties, an document is bei corporation has	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comp nd I am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I hereby s been notified in writing of this change.	·	
Ву:	tion Service Contray/Todd as its agent Agent Agent Agent Agent Agent		
	, <u>, , , , , , , , , , , , , , , , , , </u>		
	chalf of an entity:		
	Vannoy, Asst. V.P. Typed or Printed Name)		
	* * * 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)