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To:	Division of Co Fax Number	erporations : (850)617-6380	Volum	AH 8: 05	
	Account Name Account Number	: CORPORATE CREATION c : 110432003053	IS INTERNATION	AL INC.	

\*\*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 MEDECINS SANS FRONTIERES USA, INC.

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

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1. The name of the corporation is: Medecins Sans Frontieres USA, Inc.	1	-7] -7]	
2. The principal office address: 333 7TH AVENUE 2ND FLOOR	7.7.7.1 6.1 <u>4.7.1</u>	1	Table and the
NEW YORK NY 10001	111	س	777
3. The mailing address (if different): 333 7TH AVENUE 2ND FLOOR	· · ·	374	-
NEW YORK NY 10001		<u> </u>	
4. Date of incorporation/qualification: 10/28/1993 Document Number:		0000	
5. The name and street address of the current registered agent and registered office Florida Department of State:	on file v	vith the	
NRAI SERVICES, INC			
1200 South Pine Island Road			
6. The name and street address of the new registered agent (if changed) and /or re	gistered (	office	
(if changed):  Corporate Creations Network Inc.			
11380 Prosperity Farms Road #221E		_	
(P.O. Box Not acceptable)			
Palm Beach Gardens FL 33410			
The street address of its registered office and the street address of the business agent, as changed will be identical.			
Such change was authorized by resolution duly adopted by its board of direct authorized by the board, or the corporation has been notified in writing of the cha	ors or by	y an of	ificer so
Natasha Duke, Attorney-in-I	Fact		
(Signature of an officer or director) (Printed or Typed	name and ti	ilė)	
I hereby accept the appointment as registered agent and agree to act in this capa I further agree to comply with the provisions of all statutes relative to the performance of my duties, and I am familiar with and accept the obligation of my agent. Or, if this document is being filed merely to reflect a change in the regin hereby confirm that the corporation has been notified in writing of this change.	proper of position	as regi	istered
N. DWL 2/8/2			
,,	ate)		
If signing on behalf of an entity:			
Natasha Duke, Special Secretary (Typed or Printed Name)			
Make discussing to Proper Property	r State		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

Corporate Creations International Inc. 11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107