REFERENCE

87.9059_ 3,4382067

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : September 1, 2000

ORDER TIME : 11:48 AM

ORDER NO. : 819059-005

CUSTOMER NO: 4382067

CUSTOMER: Mr. Martin Haitz

Norsk Hydro Americas, Inc.

100 North Tampa Street Tampa, FL 33602-5830 600003380566-

CHANGE OF AGENT

NAME:

DIAMOND FERTILISER & CHEMICAL CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Janna Wilson

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, the undersigned corporation organized under the laws of the State of DELAWARE submits the following statement in order to change its registered office or registered agent, or both, in	
1. The name of the corporation is: $_ \ \ \ \ \ \ \ \ \ \ \ \ \ $	CHEMICAL CORPORATION
2. The mailing address of the corporation is: 100 N. TAMPA S	STREET, STE. 3200, TAMPA, FL 33602
3. Date of incorporation/qualification: 5/22/95	Document number: F95000002484
4. The name and address of the current registered agent and of	ffice:
EDWARD CAVAZUTI	FASC 8
100 N. TAMPA ST., STE 3200	SEP SEP
TAMPA, FL 33602	SSE 1
5. The name and address of the new registered agent and offic	e: (P. O. Box Not Acceptable)
Corporation Service Company	LORING 2: (
1201 Hays Street	6
Tallahassee, Florida 32301	
The street address of its registered office and the street addragent, as changed, will be identical.	ess of the business office of its registered
Such change was authorized by resolution duly adopted by i authorized by the board,	ts board of directors or by an officer so
I ded went	8/8/00
(Signature of an officer, chairman or/ice chairman of the board)	(Date)
EDWARD CAVAZUTI, PRESIDENT	<u></u>
(Printed or typed name and title) Having been named as registered agent and to accept service of corporation, I hereby accept the appointment as registered age I further agree to comply with the provisions of all statutes reliperformance of my duties, and I am familiar with and accept the registered agent.	ent and agree to act in this capacity. ative to the proper and complete
By: Yleleorah 10 Skipper	9-1-00
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	Deborah D. Skipper as it s agent
(Typed or Printed Name)	(Capacity)
* * * FILING FEE: \$35	.00 * * *
CR2EO45(7/97)	
DIVISION OF CORPORATIONS P.O. Box 6327	Tallahassee, FL 32314