ACCOUNT NO.

072100000032

REFERENCE

657278

AUTHORIZATION

COST LIMIT

\$ 35.00

ORDER DATE : July 10, 2002

ORDER TIME: 10:55 AM

ORDER NO. : 657278-325

CUSTOMER NO:

4349124

CUSTOMER: Megan Power, Paralegal The Interpublic Group Of 1271 Avenue Of The Americas

44th Floor

New York, NY 10020

CHANGE OF AGENT

NAME: FCB WORLDWIDE, INC.

800006410869--3

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY __ PLAIN STAMPED COPY

CONTACT PERSON: Ta-tanisha Adams

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
the State of Florida.
1. The name of the corporation: FCB WORLDWIDE, INC.
2. The mailing address of the corporation:
13801 FNB Parkway, Cmaha, NE 69154
3. Date of incorporation/qualification: October 31, 1995 Document number: F950000005312
4. The name and address of the current registered agent and office:
CT Corporation System
1200 South Pine Island Road
Tallahassee, FL 33301
5. The name and address of the new registered agent (if changed) and/or registered office (if-changed): (P. O. Box Not Acceptable)
Corporation Service Company
1201 Hays Street
Tallahassee, Florida 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 resolution duly adopted by its board of directors or by an officer so authorized by the board
(Signature of an officer, chairman or vice chairman of the board) JUNE 25, 2002 (Date)
Nicholas J. Camera, Secretary (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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
(Signature of Registered Agent) (Date) ///
If signing on behalf of an entity:
Maureen Cullen (Typed or Printed Name) Asst. Vice President (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)