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Division of Corporations Electronic Filing Cover Sheet

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(((H100000077303)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

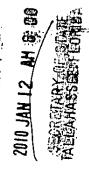
Account Number : I20000000195 Phone : (850)521-1000

Fax Number : (850)558-1575

annual report mailings. Enter only one email address please.**

**Enter the email address for this business entity to be used for future

Email Address:



REGISTERED AGENT CHANGE AASTRA USA INC.

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

Electronic Filing Menu

Corporate Filing Menu

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

statement of chi	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, t hange is submitted for a corporation organized under the laws of the State of $\overline{ ext{Delawa}}$			
	ler to change its registered office or registered agent, or both, in the State of Florida.			
1. The name of	f the corporation: AASTRA USA INC.			
2. The principal	al office address: 2811 Internet Blvd., Frisco, TX 75034			
3. The mailing a	address (if different):		- <u></u>	<u>-</u>
4. Date of incor	reporation/qualification: 06/27/1996 Document number: F9600000318	38		_
	nd street address of the current registered agent and registered office on file with the artment of State:		3	
	CT Corporation System		Ξ,	77.72
	1200 South Pine Island Road	355	5 F	=
	Plantation, FL 33324		<u>.</u> 6	Ŋ
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered office		5	
	Corporation Service Company			
	1201 Hays Street			
	(P.O. Box NOT acceptable)			
	Tallahassee, FL 32301			
The street address changed will	ress of its registered office and the street address of the business office of its register Il be identical.	red agent	•	
Such change w authorized by t	was authorized by resolution duly adopted by its board of directors or by an officer still board, or the corporation has been notified in writing of the change.	ю		
Dlanga Kalla Blanca Lozada, Attorney in Fact		t		
I hereby accept I further agree of my duties, ar document is be corporation ha	time of an affice of diseases segistered agent and agree to act in this capacity. If the appointment as registered agent and agree to act in this capacity, are to comply with the provisions of all statutes relative to the proper and complete per and familiar with and accept the obligation of my position as registered agent, eing filed merely to reflect a change in the registered office address, I hereby confirmation Service Company	rformanc Or, if thi n that th	e is e	
By:	January 8, 2010			
,	Segmine of Regulated Agent) (Date)			
- 0	pehalf of an entity:			
	rppet, Assistant VP (Typod or Printed Name)			
(* * * FILING FEE: \$35.00 * * *			
	The second secon			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
'MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)