## 760000365/



ACCOUNT NO. :

072100000032

REFERENCE : 517046

COST LIMIT

\$ 35.00 

ORDER DATE : April 8, 2002

ORDER TIME : 3:43 PM

ORDER NO. : 517046-400 800005253278--7

CUSTOMER NO: 4337578 .....

CUSTOMER: Ms. Lagusha Smith

Delta Air Lines, Inc Legal Dept # 852 1030 Delta Boulevard Atlanta, GA 30320

CHANGE OF AGENT

NAME:

DELTA TECHNOLOGY, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Mimi Stephens

C. Coulliette APR 1 1 2002

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

	- · ·	0502, 617.0502, 607.1508, or 617.1508, I er the laws of the State of Georgia	Florida Statutes,
submits the fol the State of Flo	· ·	change its registered office or registered a	gent, or both, in
1. The name of	f the corporation:		
DELTA TEC	HNOLOGY, INC. doing busine	ess in Florida as DELTA AIR LINES TECH	NOLOGY, INC.
2. The mailing	address of the corporation:_		
3. Date of inco	orporation/qualification: _July	Document number:	F9600003651
4. The name a	nd address of the current regis	tered agent and office:	20 FA
	CT Corporation System		F 2002 APR SEUNEN FALLAHA
	1200 South Pine Island Ro	pad	PR I
	Plantation, FL 33324		
5. The name a	nd address of the new registers (P. O.	ed agent (if changed) and/or registered offic Box <b>Not</b> Acceptable)	re (iff changed):
	Corporation Service Compa	ıny	9
	1201 Hays Street		
	Tallahassee, FL 32301		
The street add	ress of its registered office an	d the street address of the business office	of its registered
Such change vauthorized by	vas authorized by resolution of the board.	duly adopted by its board of directors or by	an officer so
	e of an officer, chairman or vice chairn	4/4/	)z
(Signatur	of all officer, chairman or vice chairm	and the board) (Bate)	
EAN C. ARVID	SON, Assistant Secretary  (Printed or typed name and title		
Having been n corporation, I I further agree performance o registered age	named as registered agent and hereby accept the appointme to comply with the provision of my duties, and I am familia	nd to accept service of process for the above the stregistered agent and agree to act in the statutes relative to the proper and the with and accept the obligation of my pos	e stated this capacity. complete vition as
Corporation :	Service Company	4/10/02	
ouwa	(Signature of Regist Fred Agent)	(Date)	
If signing on beh	alf of an entity:		
LAURA R. DUN		Assistant Vice Pres	ident
	(Typed or Printed Name)	(Capacity)	
	*** FIL	ING FEE: \$35.00 * * *	