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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

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 S-FER INTERNATIONAL INCORPORATED

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Help

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

Pursuant to the provisions of section statement of change is submitted for in order to change its regis	a corporation organized		York
The name of the corporation:	S-FER INTERNAT	IONAL INCORPORATED	
2. The principal office address:	663 Fifth Ave.		
	New York, NY 1002	22-5309	
3. The mailing address (if different):	700 Castle Rd		
	Secaucus, NJ 07094		
4. Date of incorporation/qualificatio	n: 10/24/1997	Document number: F970000056	528
5. The name and street address of th Florida Department of State:		and registered office on file with th	е
Alley, Maass, Ro	ogers & Lindsay, P.A.		50 2
340 Royal Poinc	iana Way, Ste 321		2012 JUN SECKET
Palm Beach, FL	33480-0431		N 28
6. The name and street address of th (if changed):	e new registered agent (if	changed) and /or registered office	8 AH S:
Corporation Ser	rice Company	**************************************	72 %
1201 Hays Stree	t ·		.T
	(P.O. Box NOT acceptable)		
Tallahassee, FL	32301		
The street address of its registered as changed will be identical.			-
Such change was authorized by reauthorized by the board, or the cor	olution duly adopted by poration has been notific	vits board of directors or by an officed in writing of the change.	icer so
(Signature of an officer of directo		rank Torrent, Treasurer (Printed or typed name and title)	
I hereby accept the appointment as I further agree to comply with the of my duties, and I am familiar wit document is being filed merely to a corporation has been notified in w Corporation Service Comp	registered agent and a provisions of all statutes h and accept the obligat eflect a change in the re riting of this change. any	gree to act in this capacity. Trelative to the proper and comple Trelative to the proper and comple Trelation of my position as registered ag Trelation of the property of the	te performance zent. Or, if this onfirm that the
(Signature of Registered Age	it) —	(Date)	· ············
If signing on behalf of an entity:			
Sylvia Queppet, Assistant Vice	President		
(Typed or Printed Name)	* * * ETT INC PEG.	£25 NN * * *	

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