

ACCOUNT NO.

072100000032

REFERENCE :

742015 7106309

AUTHORIZATION

COST LIMIT

ORDER DATE: June 22, 2000

ORDER TIME : 12:50 PM

ORDER NO. : 742015-005

500003304725--4

CUSTOMER NO:

7106309

CUSTOMER:

Ms. Tamiko F. Lewis

Sangstat Medical Corporation

6300 Dumbarton Circle

Fremont, CA 94555

CHANGE OF AGENT

NAME:

SANGSTAT MEDICAL CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

PLY grade

CONTACT PERSON: Tamara Odom

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

-	ons of sections 607.0502, 617.0502,		08, Florida Statute	?S,
	tion organized under the laws of the S	•		
•	atement in order to change its registe	rea office or register	ea ageni, or boin,	in
the State of Florida.		. •		
1. The name of the corporate	oration is: Sangstat Medical Corpor	ration		
2. The mailing address of	of the corporation is:			
6300 Dumbarto	on Circle, Fremont, CA 94555		• • • • • • • • • • • • • • • • • • • •	
3. Date of incorporation/qualification: 4/29/98		Document number	F98000002430	
4. The name and address	s of the current registered agent and of	fice:		
Corpora	te Access, Inc.		=	
1116-D	Thomasville Rd		DO JUN 26 ALL AHASEPE	
Mt. Ver	non SQ., Tallahassee FL., 3230	3		1
5. The name and address	s of the new registered agent and office	e: (P. O. Box Not Acc	eptable) o	
Corpora	ation Service Company			P.
1201 Ha	ays Street		FLORMING TO STATE	ŗ
Tallaha	assee, Flo rida 32301		DE ▶	
The street address of its agent, as changed, will be	registered office and the street addre	ess of the business of	- fice of its registere	d
Such change was author authorized by the board.	rized by resolution duly adopted by it			
(MMM)	1 that	·	6/15/00	
	cer, chairman or vice chairman of the board)		(Date)	
Carole L. Nuec				
	General Counsel and Corporat	e Secretary		
· ·	nted or typed name and title)	. £ £ 47 7		
corporation, I hereby acc I further agree to comply performance of my duties	egistered ag ent and to accept service o cept the app oint ment as registered age with the pr ovisi ons of all statutes rela s, and I am f amil iar with and accept th	int and agree to act in utive to the proper and	this capacity. l complete	, }
registered agent. Corporat By: DeKkie	tion Service Company	Que 23	2000	
	of Registered Agent)	(Date)		
If signing on behalf of an entity	:	(/		
Bobbie Hall, Asst. Vic	ce President	`)		
	Printed Name)	(Capacity)	1	
* * * FILING FEE: \$35.00 * * *				

CR2EO45(7/97)