11090000002252

(Requestor's Name)				
(Address)				
(Address)				
(City/Sta	ate/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
0				





000163767090

01/13/10--01025--026 **25.00

FILED

10 JAN 13 PH 2:50

SECRETARY OF STATE ALLAHASSEE, FLORIDA

J. BRYAN
JAN 1 9 2009
EYAMINED

COVER LETTER

TO:	Registration Section Division of Corporations			
SUB.	JECT:		erials Technology LLC ed Liability Company	_
Dear	Sir or Madam:			
The e	enclosed Registered Agent/I	Registered Office	Change and fee(s) are submitted for filing.	
Pleas	e return all correspondence	concerning this m	natter to the following:	
	Sean Em			
	Name of Pers	on		
	National Corporate			
	Firm/Compan	y	TAS 5	
			SECRETARY OF STATE SECRETARY OF SECRETARY OF STATE SECRETARY OF	
	2 Club Centre	, Suite 5	E 2	<u> </u>
	Address		Service Servic	רק
			Mo .	2
			SEE, FLORI	<u>بد</u> در
	Edwardsville, I			17
	City/State and Zip	Code	器点	2
			T	
	semerick@ncer E-mail address: (to be used for future	vices.com		
t	z-mail address: (to be used for future	annual report notification	.ion)	
For fi	urther information concerni	ng this matter, ple	ease call:	
	Sean Emerick	at (618) 656-3791	
	Name of Person		Area Code & Daytime Telephone Number	
	STREET/COURIER ADI	DFCC.	MAILING ADDRESS:	
	Registration Section	ALLOS.	Registration Section	
	Division of Corporations		Division of Corporations	
	Clifton Building		P.O. Box 6327	
	2661 Executive Center Circ	le	Tallahassee, Florida 32314	
	Tallahassee, Florida 32301			
	Enclosed is a check for	the following amo	ount:	
	\$25 Filing Fee		\$55 Filing Fee & Certified Copy	

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:	Heraeus Materials Technology LLC		
2. (a) Principal office address of limited liability company:			
(Note: MUST BE STREET ADDRESS)	540 Madison Ave. New York, NY 10022		
(b) Mailing address of limited liability company	:		
(Note: MAY BE POST OFFICE BOX)	350 4		
06/15/2009	M0900000225203		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office sho			
Registered Agent:	CT Corporation System		
Registered Office Address:	1200 South Pine Island Rd. Plantation, FL 33324		
(b) Enter name of NEW Registered Agent and/ NEW Registered Agent:	or NEW Registered Office address: NRAI Services, Inc.		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS	2731 Executive Park Drive, Suite 4		
-	Weston ,FL33331		
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member			
Cathi Wall, Authorized Person			
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 obligations of my position as registered agent as provided for in Chapter 608, F.S. or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change. NRAI Services, Inc. by: Signature of Registered Agent Sean L. Emerick, Asst. Secretage			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00