## ma1000000 885



ACCOUNT NO. : 072100000032

REFERENCE

004513

7165873

AUTHORIZATION

COST LIMIT

ORDER DATE: October 21, 1998

ORDER TIME :

9:40 AM

ORDER NO. : 004513-305

100002671151--4

CUSTOMER NO:

7165873

CUSTOMER: Ms. Konnie Smith

Opus U.s. Corporation 9900 Bren Road East

Minnetonka, MN

CHANGE OF AGENT

NAME: OIRE USA, L.L.C.

PERSONAL OF CONTORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CT PERSON: Robert Maxwell

Name Availability Document

Examiner

Updater

u∵ca′er Verifyer

## Florida Department of State, Sandra B. Mortham, Secretary of State

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

•	ons of sections 608.416 or ized under the laws of the St	608.508, Florida Statutes, i ate of DELAWARE	the undersigned i	limited.
submits the following st	atement in order to change	its registered office or regis	stered agent, or b	oth, in
the State of Florida.	(PLEA	ASE PRINT)		
la. The name of the lim	ited liability company is: o	IRE USA, L.L.C.		<del></del>
J	s of the limited liability cor	• •	enter	
9900 Bren	Road East, Minnetonka,	MN 55343		·····
1c. Date of filing/regist	tration in Florida: 12/26/97	Document number:	м97000000885	
2. The name and address	ss of the current registered a	agent and office:		
	C T CORPORATION SYSTE	<u> </u>		
	1200 SOUTH PINE ISLAN	ND ROAD	<del>_</del>	_
	PLANTATION, FL 33324		<del></del>	98 OCT 2
3. The name and addres	ss of the new registered age	nt and office: (P.O. Box NO	T ACCEPTABLE)	
	Corporation Service C	Company	_	3 AMII:
	1201 Hays Street		_	1:55
	Tallahassee, FL 32301	<u>L</u>	·	J
the registered agent will Such change was autho company or as provided	be identical. rized by affirmative vote of		of the limited li	iability
Keith Bednarowski	- President/Manager			
as registerea agent.	registered agent and to acc reby accept the appointme ee to comply with the pro f my duties, and I am famil	cept service of process for tent as registered agent and visions of all statutes relaliar with and accept the obj	the above stated a agree to act to the properly places of my p	limited in this er and osition
(Signature of Regis	Etinate stered Agent)		-2 /9 y/ (Date)	—
/L/D:m:=1 - 2 2 4 2 1	·		· · · · · · · · · · · · · · · · · · ·	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

**FILING FEE: \$35.00** 

INHS 18(1/96)