M97431

CORPORATION(S) NAME		LAHASS 13	FILED PM 2: 2
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	() Fictitious Name	() UCC	
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Florida Department of State, Sandra B. Mortham, Secretary of State

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

	Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORIDA
_	submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
	1. The name of the corporation is: CDC/SMT, INC.
<u>.</u>	2. The mailing address of the corporation is: 650 MADISON AVE, NEW YORK, NY 10022
	3. Date of incorporation/qualification: SEPT. 7, 1988 Document number: M97431
	4. The name and address of the current registered agent and office:
	CORPORATION SERVICE COMPANY
	1201 HAYS STREET AHAYS ARA
	TALLAHASSEE, FL 32301
	5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
	C T Corporation System
	c/o C T Corporation System, 1200 South Pine Island Road
	Plantation, Florida 33324
	The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical
	Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
	(Signature of an officer, chairman or vice chairman of the board) (Date)
	KIRK HOOD Secretary 12/11/01
	(Printed or typed name and title) / (Date)
	Having been named as registered agent and to accept service of process for the above stated corporation, 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 obligation of my position as registered agent.
	(Signature of Registered Agent)
	If signing on behalf of an entity: KIRK HOOD ASSISTANT SECRETARY
-	(Typed or Printed Name) (Capacity)
	CR2E045(4/95) FILING FEÉ: \$35.00