M98000000742

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	; #)	
		MAIL	
(Bu	siness Entity Nam	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		



FILED 06 OCT 25 PH 1: 02 SECRETARY OF SIAIL TALLAHASSEE. FLORIDA



Office Use Only

_ _

CORPORATION SERVICE COMPANY	CORPORATION	SERVICE	COMPANY"
-----------------------------	-------------	---------	----------

	ACCOUNT NO.	:	072100000	0032		
	REFERENCE	:	549807	7530921	. 0	
	AUTHORIZATION	S	mille	nan	TALL SECTION	
	COST LIMIT	ن .	\$ 2 5.00		ATT IS	~1
					SEX 3 1	
ORDER DATE :	October 24, 2006				FUR I	
ORDER TIME :	9:48 AM				LORINE OR	
ORDER NO. :	549807-010				P	
CUSTOMER NO:	7530921					

CHANGE OF AGENT

.

. -

.....

NAME: GREYHAWK NORTH AMERICA, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Denise Mick

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR

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.

1. The name of the limited liability company is: <u>GREYHAWK NORTH AMERICA, L.L.C.</u>

2. The mailing address of the limited liability company is :

260 Crossways Park Drive, Woodbury, NY 11797

July 9, 1998

3. Date of filing/registration in Florida

M9800000742

32301

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T Corporation System Name 1200 South Pine Island Road Address Plantation, FL 33324 City, State and Zip

6. The name and address of the new registered agent and/or office:

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box NOT acceptable)

Tallahassee FL

City, State and Zip

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)

(Printed or typed name of signee

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.

(Signature of Registered Agent) Michelle R. Vannoy, Asst. Vice President

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