## P01000122502

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(Business Entity Name)
(Document Number)
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	ACCOUNT NO.	: 07210000032
	REFERENCE	: 97089 7515300
	AUTHORIZATION	Spullenan
	COST LIMIT	: \$ 35.00
ORDER DATE :	January 6, 2006	
ORDER TIME :	2:14 PM	
ORDER NO. :	797065-010	
ATTOMOMED NO.	7515300	

## CHANGE OF AGENT

NAME: DMYTRO US, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

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 PLAIN STAMPED COPY

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CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER: \_\_\_\_\_

## 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, this statement of change is submitted for a corporation organized under the laws of the State of <u>Florida</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: <u>DMYTRO US</u>, INC.

2. The principal office address: 14229 Falls Church Drive, #1706, Orlando, FL 32837

3. The mailing address (if different):\_

4. Date of incorporation/qualification:	December 31, 2001	Document number:	P01000122502

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

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14229 Falls Church Drive, #1706

Orlando, FL 32837

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

(P.O. Box NOT acceptable)

Tallahassee, FL 32301

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, or the corporation has been notified in writing of the change.

ure of an officer or director)

DMYTRU DONDYK: (Printed or typed name and hille) PRESIDEN

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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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company By: (Signature of Registered

If signing on behalf of an entity:

Michelle R. Vannoy, Asst. V.P.

(Typed or Printed Name)

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)