

P02000084752

(Requestor's Name)

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(City/State/Zip/Phone #)

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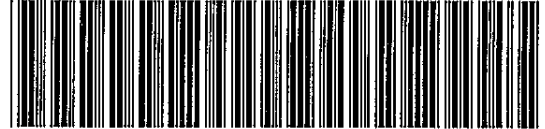
(Business Entity Name)

(Document Number)

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 121634 7429347

AUTHORIZATION : *Patricia Pigute*

COST LIMIT : \$ 35.00

ORDER DATE : January 4, 2005

ORDER TIME : 10:08 AM

ORDER NO. : 121634-005

CUSTOMER NO: 7429347

CUSTOMER: Ms. Valerie Axelrod
Iir Us Holdings, Inc.
4th Floor
708 Third Avenue
New York, NY 10017-4103

CHANGE OF AGENT

NAME: ECUSTOMERSERVICEWORLD.COM,
INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight -- EXT#

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ECUSTOMERSERVICEWORLD.COM, INC.
2. The principal office address: 5292 Creekside Tr., Sarasota, FL 34243
3. The mailing address (if different): _____

4. Date of incorporation/qualification: August 5, 2002 Document number: P02000084752

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

Ian Parsons

5292 Creekside Tr.

Sarasota, FL 34243

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.


(Signature of an officer or director)

Valerie Axelrod Assistant Secretary
(Printed or typed name and title)

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 Agent)


(Date)

If signing on behalf of an entity:

Marva L. Williams, 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

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