P21887



ACCOUNT NO.

072100000032

REFERENCE

627220

: \$ 35.00 COST LIMIT

ORDER DATE: March 16, 2000

9:46 AM ORDER TIME :

ORDER NO. : 627220-155 000003197810--9

CUSTOMER NO:

4812909

Ms. Christine Didomizio CUSTOMER:

Degussa-huls Corporation

65 Challenger Road

Ridgefield Park, NJ 07660

CHANGE OF AGENT

NAME: CREANOVA INC.

G. COULLIETTE APR 0 6 2000

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward

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

Pursuant to the provisions of sections 607.0502, 617.03	
the undersigned corporation organized under the laws of submits the following statement in order to change its re	
the State of Florida.	gistered office or registered agent, or bein, at
The name of the corporation is: CREANOVA INC.	
1. The hame of the corporation is.	
2. The mailing address of the corporation is:	
3. Date of incorporation/qualification: November 28, 19	Document number: P21887
4. The name and address of the current registered agent a	and office:
CT Corporation System	
1200 South Pine Island Road	ASSE TARY 11.
Plantation, FL 33324	E P
5. The name and address of the new registered agent and	office: (P. O. Box Not Acceptable)
Corporation Service Company	
1201 Hays Street	
Tallahassee, Florida 32301	
The street address of its registered office and the street agent, as changed, will be identical.	address of the business office of its registered
Such change was authorized by resolution duly adopted authorized by the board.	by its board of directors or by an officer so
Laurago	March 29, 2000
(Signature of an officer, chairman or vice chairman of the board	
President & Chief Executive Officer	nama kalanda kan kan mana sa
(Printed or typed name and title) Having been named as registered agent and to accept ser corporation, I hereby accept the appointment as registered I further agree to comply with the provisions of all statute performance of my duties, and I am familiar with and accept series agent.	ed agent and agree to act in this capacity. es relative to the proper and complete
Bu C av Ood - Carol X	April 3, 2000
By: (Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
Carol K. Dolor	Asst, Vice President
(Typed or Printed Name)	(Capacity)
* * * FILING FEE: \$35.00 * * *	

CR2EO45(7/97)