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To:

Division of Corporations

Fax Number

: (850)205-0380

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5926

REGISTERED AGENT CHANGE

MCI INTERNATIONAL, INC.

Certificate of Status	0
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CT CORPORATION SYSTM

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CT CORPORATION SYS

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

statement of a	change is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statu organized under the laws of the State of Delar registered agent, or both, in the State of Florid	Warc
	of the corporation: MCI INTERNATIO		
	pal office address: 22001 LOUDOUN (
3. The mailin	ng address (if different):		,
4. Date of inc	corporation/qualification: 2/23/1990	Document number: P28240	
	and street address of the current regists	ered agent and registered office on file with th	e
	THE PRENTICE-HALL CORPOR	ATION SYSTEM INC.	
	1201 HAYS STREET, SUITE 105	-	_4
	TALLAHASSEE FL 32301		O6 SEC
6. The name (if changed		d agent (if changed) and /or registered office	FILE MAY 31 CRETARY CAHASS
	C T Cor	rporation System	FD ED
	c/o C T Corporation Syst	tem, 1200 South Pine Island Road	2: 3 STAT
	Plantatio	n, Florida 33324	O _A
as cuantified A	Aut de idendest	street address of the business office of its re- dopted by its board of directors or by an offi een notified in writing of the change.	
Kynd	manage of an officer of director)	Kyndra Worrell, Assistant Sacretary	
I hereby according to the I further agn of my duties, document is corporation.	ept the appointment as registered agree to comply with the provisions of a and I am familiar with and accept the being filed merely to reflect a change has been notified in writing of this th	ent and agree to act in this capacity. It statutes relative to the proper and complet he obligation of my position as registered ag e in the registered office address, I hereby co lange.	re performance cht. Or, if this onfirm that the
Ву:	C T Corporation System (Signature of Registered Agent)	5/26/06	
If signing on	behalf of an entity: JAMES M. NEWSOME	(wow)	•
	Special Assistant Secretary (Typed or Printed Name)	•	
		G 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)

FL006 - 09/14/2001 C T System Online