



ACCOUNT NO. : 07210000032

REFERENCE: 407268 4358627

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: October 11, 1999

ORDER TIME: 11:27 AM

ORDER NO. : 407268-035

CUSTOMER NO: 4358627

CUSTOMER: Mr. Wendell E. Phillips

Southdown, Inc. 1200 Smith St. / Ste. 2400

Houston, TX 77002

CHANGE OF AGENT

NAME: SMI HOLDINGS INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Janna Wilson

C. COULLIETTE OCT 1 2 1999

100003012661--8

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

	e provisions of secti d corporation organiz				08 <u>.</u> Florida	Statutes,
					7	1 .7 .
the State of Flo	lowing statement in c	oraer to change	iis regisierea off	nce or register	rea_agent, or	both, in
•	f the corporation is:	SMT HOLDINGS	rkter		<b>4</b> <del>∵</del> :	
1. The hame of	t the corporation is.	SMI HOLDINGS .	INC.		=	
			· · · · · · · · · · · · · · · · · · ·	<del></del>	<del>_=</del>	
2. The mailing	address of the corpor	ration is: P.O.	BOX 1659		<del>=</del>	
INVERNESS	, FL 34451-1659				<u> </u>	-
3. Date of inco	rporation/qualificatio	n: 06/26/92	Doc	cument number	<u>P3</u> 9433	
4. The name ar	nd address of the curre	ent registered ag	gent and office:		· <del></del>	
	PATRICIA M. PETRA	СН		···.	 	-
	2461 EAST GULF-TO	-LAKE HIGHWAY	-	-	= 등 유	9
	INVERNESS, FL 344	51-1659				- 
<ol><li>The name an</li></ol>	d address of the new	registered agen	t and office: (P. C	). Box Not Acc	eptable	의 길
	Corporation Servi	ce Company	<u> </u>		== EXX == = = = = = = = = = = = = = = = = =	7 1
	1201 Hays Street				- TS	<b>≅</b> □
	Tallahassee, Flor	ida 32301				<del></del> ω
The street addreagent, as change	ess of its registered of ed, will be identical.	office and the s	treet address of t	he business of	fice of its reg	gistered
	as authorized by resone board.	olution duly add	opted by its board	d of directors of	or by an offic	cer so
authorized by th	le board.	1/		_	7. /	
Signature	of an officer, chairman or	re-	-1N		16/99	
(Signature	on an officer, chammar of	ovice chamman of the	e board)	/	(Date)	
VENDELL PHILLI		SISTANT SECRE	TARY	_	· <u></u>	
Havina haan na	(Printed or typed na	<u>-</u>	-4t C	, Y Y		
further agree t	med as registered ago ereby accept the appo o comply with the pro my duties, and I am fo t.	ointment as regi	stered agent and tatutes relative to	agree to act in the proper and	thi <u>s</u> capacity. I complete	•
3v: Lou	ra R. Dri	28	-	10-12.	99	
	(Signature of Registered A	gent		(Date)		
f signing on behalf	of an entity:			-	<u> </u>	
AURA R. DUNLA			ASSISTANT VICE	PRESIDENT	·-	
	(Typed or Printed Name)			(Capacity)		
	*	* * FILING I	FEE: \$35.00 * * *	*	<del></del>	
でクロハ <i>45(7)</i> のす\					<del></del>	

P. O. Box 6327

TALLAHASSEE, FL 32314

**DIVISION OF CORPORATIONS**