(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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ACCOUNT	NO.	:	072100000032

REFERENCE : 890110 5050445

AUTHORIZATION CAPULACION

COST LIMIT (\$ 35.00

ORDER DATE : February 27, 2006

ORDER TIME : 10:13 AM

ORDER NO. : 890110-040

CUSTOMER NO: 5050445

CHANGE OF AGENT

NAME: FAIRCHILD SEMICONDUCTOR

CORPORATION

PLEASE	RETURN	THE	FOLI	LOWING	AS	PROOF	OF	FILING:	
XX	_ CERTII _ PLAIN			-					
CONTACT	PERSON	V: 7	roy	Todd					

EXAMINER'S INITIALS:

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

statement of char		607.1508, or 617.1508, Florida Statutes, this ed under the laws of the State of Delaware ed agent, or both, in the State of Florida.					
1. The name of the	ne corporation: FAIRCHILD SEMICONDU	JCTOR CORPORATION					
2. The principal of	office address: 82 Running Hill Road, South	h Portland, ME 04106					
3. The mailing ac	ddress (if different):						
4. Date of incorp	oration/qualification: February 2, 1999	Document number: F9900000630					
	street address of the current registered age tment of State:	ent and registered office on file with the					
	C T Corporation System						
	1200 South Pine Island Road						
	Plantation, FL 33324	THE					
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or registered office (1)					
	Corporation Service Company						
	1201 Hays Street						
	(P.O. Box NOT acceptable)						
	Tallahassee, FL 32301						
The street addre as changed will	ss of its registered office and the street a be identical.	ddress of the business office of its registered agent,					
Such change wa authorized by th	is authorized by resolution duly adopted to board, or the corporation has been noting	by its board of directors or by an officer so fied in writing of the change.					
(Signatu	ulle Culling of director)	Maureen Cullen, Attorney in Fact (Printed or typed name and title)					
I further agree to of my duties, an document is beil corporation has	been nounced in writing of this change.	agree to act in this capacity. tes relative to the proper and complete performance cation of my position as registered agent. Or, if this registered office address, I hereby confirm that the					
Ву: МИ	Service Company heller Vaunoy	March 13, 2006 (Date)					
	thature of Registered Agent) half of an entity:	(Daile)					
Michelle R. Van	noy, Asst. Vice President						
Γ)	yped or Printed Name)						

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