Metz Secusion Name	The arrive of
Address 205-9000	18.5E. F. S.
City/State/Zip Phone #	

Office Use Only

CORPORATION NAME(S)	& DOCUMENT NUMBER(S),	(if known):
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1. Teacher Insurance	Le and Annuity ASSOC, OF Amouca. (Document #)
2. (Corporation Name)	(Document #)
3(Corporation Name)	(Document #) 300046305030 -10/11/0101004001 *****35.00 ******35.00
(Corporation Name) Walk in Pick up time Wall out Will wait	(Document #) Certified Copy Photocopy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials ADR

CR2E031(7/97)

10/10/01

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,
the undersigned corporation organized under the laws of the State of New York
submits the following statement in order to change its registered office or registered agent, or both in
ine siale of Floriaa.
1. The name of the corporation: Tenchers Insurance And Hanvity
Association of America
2. The mailing address of the corporation: 730 Third Avenue
New York, N. Y. 10017
3. Date of incorporation/qualification: 10 3 S2 Document number: 809000
4. The name and address of the current registered agent and office:
Stephen W. Motz
318 North Monroe St. SEE 5 [
Tallahassee FL 32301 ZZ Z D
5. The name and address of the new registered agent (if changed) and/or registered office fibeharized).
(P. O. Box Not Acceptable)
Stephen W. Mets
215 S. Monroe St., Suite 505
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
PLALCOLIN (BUPBEL (Date)) (Date)
VICE PRESIDENT - Chief CMINSEL
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Stephen Mets Registered I gent
(Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314