

Document Number Only

F95000003070

C T Corporation System

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301

City

State

Zip

Phone

CORPORATION(S) NAME

800002480928--9

-04/07/98--01036--020

\*\*\*\*\*35.00 \*\*\*\*\*35.00

First American Equity Loan Services, Inc.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

98 APR - 7 PM 2:34

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John R.A. Change

DEPARTMENT OF CORPORATION

98 APR - 7 AM 10:49

**Florida Department of State, Jim Smith, Secretary of State**

**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 Ohio submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: First American Equity Loan Services, Inc.

1b. Date of incorporation October 26, 1979 Document number

2. The name and address of the current registered agent and office:

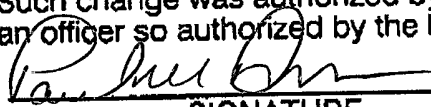
Mike Conway, First American Title Insurance Company  
2807 Remington Circle, Tallahassee, Florida 32308-375

3. The name and address of the new registered agent and office:  
(P.O. Box Not Acceptable)

C T CORPORATION SYSTEM  
c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation, Florida 33324


The street address of its registered agent 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 authorized by the board.

  
SIGNATURE  
3/23/98  
DATE

Paul M. Doman, V.P. General Counsel &  
Typed or printed name and title Secretary

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 BY:   
(Registered Agent)  
DATE 3/31/98 Gil S. Apellis, Asst. Secretary

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**

**FILED**  
98 APR -7 PM 2:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA