F96000000951

103 N. MERIDIAN ST TALLAHASSEE, FL 222-1173	TREET, LOWER LEVEL 32301		
PILING CONERS	WEST 22		
ACCT. #FCA-14	CINDY HICKS  FILED  FILED  CINDY HICKS		
CONTACT:	CINDY HICKS		
DATE:	3-21-02		
REF. #:	0173		
CORP. NAME:	PSI Institutional Advisors: 2 R.	-:	
( ) A D'TICLE COM MICON	- 1 2 2 <u>2                              </u>	-1 -1 -1 -1 -1	
( ) ARTICLES OF INCORPORATION ( ) ARTICLES OF AMENDMENT ( ) ARTICLES OF DISSOLUTION			
( ) ANNUAL REPORT			
( ) FOREIGN QUALIFICATION ( ) LIMITED PARTNERSHIP ( ) LIMITED LIABILITY ?			
( ) REINSTATEMENT	( ) MERGER ( ) WITHDRAWAL		
( ) CERTIFICATE OF CA	Charge of Agest	- <u></u> -	
STATE FEES PR	REPAID WITH CHECK#27344 FOR \$ 35.00		
AUTHORIZATIO	ON FOR ACCOUNT IF TO BE DEBITED:  5.00005139745-015 -03/21/02-01045-015 *****35.00 ******35.00		
	COST LIMIT: \$		
PLEASE RETUR	C. Coulliste MAR 2 1 2002		
( ) CERTIFIED COPY	( ) CERTIFICATE OF GOOD STANDING ( PLAIN STAMPED COPY		
( ) CERTIFICATE OF	STATUS		

Examiner's Initials

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.13 the undersigned corporation organized under the laws of the State of	
submits the following statement in order to change its registered of the State of Florida.	
1. The name of the corporation: PSI Institutional Advisors, Inc.	
2. The mailing address of the corporation : 701 Western Avenue, Gler	ndale, CA 91201-2349
3. Date of incorporation/qualification: February 26, 1996 Doc	ument number: F9600000951
4. The name and address of the current registered agent and office:	02 SEI TAL
Corporation Service Company	CRE
1201 Hays Street	TAR AR 2
Tallahassee, FL 32301-2525	
5. The name and address of the new registered agent (if changed) an (P. O. Box Not Acceptable)	d/or registered office (if changed):
NRAI Services, Inc.	27
526 E. Park Avenue	
Tallahassee, FL 32301	
The street address of its registered office and the street address of agent, as changed, will be identical.	the business office of its registered
Such change was authorized by resolution duly adopted by its boar authorized by the board.	rd of directors or by an officer so
M Roberts	March /3 , 2002
(Signature of an officer, chairman or vice chairman of the board)	(Date)
Michele Roberts, Vice-President (Printed or typed name and title)	
100000000000000000000000000000000000000	and agree to act in this capacity. e to the proper and complete bligation of my position as larch , 2002
(Signatufe of Registered Agent)	(Date)
If signing on behalf of an entity:  Ricardo Orozco, Assistant Secretary	
(Typed or Printed Name)	(Capacity)
* * * FILING FEE: \$35.00 * *	*

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314