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Florida Department of State  
Division of Corporations  
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REGISTERED AGENT CHANGE

1ST CONTINENTAL MORTGAGE INC.

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

September 26, 2003

1ST CONTINENTAL MORTGAGE INC.  
1040 BAYVIEW DR, SUITE 610  
FT. LAUDERDALE, FL 33304US

SUBJECT: 1ST CONTINENTAL MORTGAGE INC.  
REF: F99000000266

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Teresa Brown  
Document Specialist

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Division of Corporations - P.O. BOX 6327 Tallahassee, Florida 32314



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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, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: 1ST CONTINENTAL MORTGAGE INC.
- 2. The principal office address: 1040 SO. VIEW CT SUITE 610 FT. LAUDERDALE FL 33304
- 3. The mailing address (if different):
- 4. Date of incorporation/qualification: 11/24/1999 Document number: F99000002651A
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

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ERIC BUSSIERE  
625 NE 17TH TERRACE SUITE A  
TALLAHASSEE FL 33304

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- INGEL M GARCIA, ESQ.  
2025 MIAMI ROAD HY  
(F.O. Box or personal mailbox NOT acceptable)  
FT. LAUDERDALE FL 33335

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 authorized by the board, or the corporation has been notified in writing of the change.

*[Signature]* (Signature of officer, chairman or vice chairman of the board)      Raymond L. Maatz (Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

*[Signature]* (Signature of Registered Agent)      9/22/03 (Date)

If signing on behalf of an entity:  
INGEL M GARCIA, ESQ (Typed or Printed Name)      REGISTERED AGENT (Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:  
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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