173692

'CT CORPORATION SYSTEM

818 West Seventh Street Los Angeles, CA 90017 Tel. 213 627 8252

Fax 213 614 9347 July 26, 1999

SECRETARY OF STATE Corporate Records Bureau **Division of Corporations** 409 E. Gaines Street Tallahassee, Florida 32399

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RF:

METROPOLITAN MORTGAGE CO.

Order No.: 1813976

Dear Sirs:

As requested by counsel, we enclose for filing a Statement of Change of Registered Office and Agent on behalf of this corporation, together with funds in payment of the required fees.

Please forward the usual evidence of filing directly to my attention.

If you have any questions or if for any reason this filing cannot be effected prompted, please notify this office of the details by calling our toll-free number (800)888-9207.

Very truly yours,

Edith C. Shannon Customer Specialist

ECS:

encis.

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 607.05 Florida Statutes, the undersigned corporation | organized under the laws of t | he State of |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| FLORIDA submits the following statem or registered agent, or both, in the State of Fl | orida. | stered office |
| _ | | |
| 1a. The name of the corporation is: METROPOL | LITAN MORTGAGE CO. | - |
| | | |
| 1b. Date of incorporation May 20, 1953 | Document number 1 | 73692 9 |
| 2. The name and address of the current regis | stered agent and office: | JUL 29 |
| | 27 | He I |
| 4700 Biscayne Blvd., S200, Miami, FL 333 3. The name and address of the new register (P.O. Box Not Acceptable) C T CORPOR | | 9: 03 FLORIDA |
| =/o C T CORPORATION SYSTEM, 1200 South P | | Florida 33324 |
| The street address of its registered agent and of its registered agent as changed will be identified by resolution during the street address of its registered agent and such change was authorized by resolution during the street agent agent and such changes with a such change was authorized by the board. SIGNATURE A DATE | rtical. | ctors or by |
| HAVING BEEN NAMED AS REGISTERED AG PROCESS FOR THE ABOVE STATED CORP IN THIS CERTIFICATE, I HEREBY ACCEPT T AGENT AND AGREE TO ACT IN THIS CAPAC WITH THE PROVISIONS OF ALL STATUTES PLETE PERFORMANCE OF MY DUTIES, AND THE OBLIGATION OF MY POSITION AS REG | PORATION AT THE PLACE DE THE APPOINTMENT AS REGIS CITY. I FURTHER AGREE TO RELATIVE TO THE PROPER DIAM FAMILIAR WITH AND A | ESIGNATED STERED COMPLY AND COM- ACCEPT |
| SIGNATURE | BY: | |
| SIGNATURE BY: D.I. FARBER, Assistant Secretary (Registered Agent) | | |
| DATE | | |
| Division of Cornorations, P.O. Box 6327, Tallahassee, Fl. 32314 | | |

Filing Fee: \$35.00

(FLA - 2194 - 3/4/92)

CR2E045 (7-91)