



Hardy M. Snow, Jr.
Founder

Accredited Surety & Casualty

Accredited Bond Agencies, Inc.
Accredited Surety & Casualty Company, Inc.

223551

November 15, 2000

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

600003470956--2
-11/20/00--01132--006
*****35.00 *****35.00

RE: Change of Principal Office and Change of Registered Office
for Accredited Holding Corporation
Florida Document Number 223551

Dear Madam or Sir:

Effective November 10, 2000, Accredited Holding Corporation has
changed its street address and mailing address as follows:

Street Address

400 S. Park Avenue
Suite 320
Winter Park, FL 32789

Mailing Address

P. O. Box 2067
Winter Park, FL 32790-2067

Please correct the corporation's street address and mailing address on your
records.

In addition, enclosed for filing is a Statement of Change of Registered Office or
Registered Agent to change the Registered Office of the corporation, and a
check for \$35.00 in payment of the filing fee.

If you have any questions, please call me.

Sincerely,

Deborah S. Jayad

Deborah S. Jayad
President

Have OK

R O / R A
Change

FILED
00 NOV 20 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. PAYNE NOV 30 2000

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

1. The name of the corporation : Accredited Holding Corporation
2. The mailing address of the corporation : P. O. Box 2067
Winter Park FL 32790-2067
3. Date of incorporation/qualification: 05/11/1959 Document number: 223551
4. The name and address of the current registered agent and office:

Deborah Snow Jallad

918 S. Orange Ave.

Orlando, FL 32806

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)

Deborah S. Jallad

400 S. Park Ave., Suite 320

Winter Park, FL 32789

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.

Deborah Jallad
(Signature of an officer, chairman or vice chairman of the board)
Deborah S. Jallad, President

11/15/00
(Date)

(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.

Deborah Jallad
(Signature of Registered Agent)

11/15/00
(Date)

If signing on behalf of an entity: N/A

(Typed or Printed Name)

(Capacity)

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