

698830

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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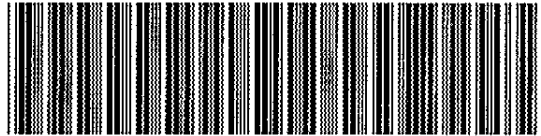
(Business Entity Name)

(Document Number)

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02 OCT 25 AM 11:53

DIVISION OF CORPORATION

FILED

02 OCT 25 PM 12:46

SECRETARY OF STATE
TALLAHASSEE, FL 32301

RA change 10/25/02
Ti Lewis



ACCOUNT NO. : 072100000032

REFERENCE : 786781 7155110

AUTHORIZATION

Patricia Piguto

COST LIMIT : \$ 35.00

ORDER DATE : October 17, 2002

ORDER TIME : 10:20 AM

ORDER NO. : 786781-045

CUSTOMER NO: 7155110

CUSTOMER: Patricia Meudt, Legal Asst
Cendant Corporation
1 Campus Drive

Parsippany, NJ 07054

CHANGE OF AGENT

NAME: REFERRAL ASSOCIATES OF
FLORIDA, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon -- EXT# 1145

EXAMINER: _____

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 : REFERRAL ASSOCIATES OF FLORIDA, INC.

2. The mailing address of the corporation : 1 Campus Drive, Parsippany, NJ 07054

3. Date of incorporation/qualification: 08/13/1981 Document number: 698830

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

Lawrence Paine

1650 Prudential Drive Suite 400

Jacksonville, FL 32207

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

Corporation Service Company

1201 Hays Street

Tallahassee, Florida 32301

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.

Maureen Cullen

(Signature of an officer, chairman or vice chairman of the board)

10/22/2002

(Date)

Maureen Cullen, Attorney-In-Fact

(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.

Elva M. Shipkowski

(Signature of Registered Agent)

10/23/2002

(Date)

If signing on behalf of an entity:

Elva M. Shipkowski,

(Typed or Printed Name)

Asst. V.P.

(Capacity)

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