834587

| (Requestor's Name) | | | | | |
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| PICK-UP | WAIT | MAIL | | | |
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| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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ACCOUNT NO. : 072100000032

REFERENCE : 950449 167868A

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: November 1, 2004

ORDER TIME : 10:37 AM

ORDER NO. : 950449-410

CUSTOMER NO: 167868A

CUSTOMER: Ms. Carol R. Mullis

Wachovia Corporation

One Wachovia Center, Nc0630 301 South College Street-30th Charlotte, NC 28288-0630

CHANGE OF AGENT

NAME:

SOUTHTRUST MORTGAGE

CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Justin Cheshire



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 3, 2004

CSC __ Atten: Justin Cheshire 1201 Hays Street Tallahassee, FL 32301

SUBJECT: SOUTHTRUST MORTGAGE CORPORATION

Ref. Number: 834587

We have received your document for SOUTHTRUST MORTGAGE CORPORATION and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

In order to file your document, the subject entity must first be reinstated.

The total amount due to reinstate is \$750,00.

You can change the registered agent on the reinstatement form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey Document Specialist

Letter Number: 204A00063180

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O1VISION OF CONFORMIONS

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

| Pursuant to the | provisions of section | s 607.0502, 617.0502, 6 | , 507.1508, or 617.1508, Florida Statu | tes, this statement of |
|---|---|---|--|----------------------------------|
| | - | | aws of the State of Delaware | in order |
| to change its re | egistered office or reg | istered agent, or both, in | n the State of Florida. | |
| 1. The name of | the corporation: SOUT | THTRUST MORTGAGE CO | RPORATION | |
| 2. The principal | l office address: 210 | Wildwood Parkway | <u> </u> | |
| Birmingham | n, AL 35209 | | <u> </u> | |
| 3. The mailing | address (if different): | P.O. Box 532060 | , Birmingham, AL 35253-20 | 60 |
| 4. Date of incor | poration/qualification | 1: June 30, 1975 | Document number: 834587 | |
| | d street address of the artment of State: | e current registered agen | and registered office on file with the | е |
| | C T Corporation | System | | |
| | 1200 South Pine | Island Road | | <u> </u> |
| | Plantation, FL 3 | 33324 | | SECRET |
| 6. The name an (if changed): | | | f changed) and /or registered office | TARK OF |
| | Corporation Serv | ice Company | | — FST 5 |
| | 1201 Hays Street | | | - 23 - 23 - 23 - 23 |
| | | (P.O. Box or personal mailt | ox NOT acceptable) | |
| | Tallahassee, FL | 32301 | _ . | |
| The street addr changed will be | ess of its registered of | office and the street add | dress of the business office of its reg | ristered agent, as |
| Such change w | as authorized by reso e corporation has be | olution duly adopted by en notified in withing o | y its board of directors or by an office of the change. | cer so authorized by |
| M | auren | | Maureen Cullen, Attorney in | |
| I hereby accept I further agree duties, and I an being filed mer been notified in | yruing of this chan | registered agent and a rovisions of all statutes rocept the obligation of the in the registered offi | gree to act in this capacity. The relative to the proper and completed the property that the property of the p | |
| Corporation | Service Company | 7 | Navente | 1. 2004 |
| | (Signature of Registered Ag | ent) | (Date) | |
| If signing on be | chalf of an entity: | | | |
| Marva Williams | | Assistant Vice President | | |
| | Typed or Printed Name) | | (Canacity) | |

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