840391				
(Requestor's Name) (Address) (Address)	900047732809			
(City/State/Zip/Phone #)				
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	03/07/0501077008 **35.00 05 MAR -7 AH SECORE A TO TALLAND TE			
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TRANSMITTAL LETTER

Amendment Section Division of Corporations **TO:**

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SUBJECT: Waterfield Mortgage Company, Incorp	orated		
	(Name of corporation)		
DOCUMENT NUMBER:	840391		
The enclosed Statement of Change of Regis	tered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
Traci Smith			
	(Name of person)		
	(Name of firm/company)		
	(Name of minicompany)		
145 Baker Street	(Address)		
	(//////////////////////////////////////		
Marion, OH 43302	(City/state and zip code)		
For further information concerning this mat	er, please call:		
Traci Smith (Name of person)	at (<u>740</u>) <u>387-6806</u> (Area code & daytime telephone number)		
(Name of person)			
Enclosed is a \$35.00 check made payable to	the Department of State.		
Mailing Address	Street Address,		

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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CR2EO45(09/03)

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 _ Indiana in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Waterfield Mortgage Company, Incorporated

2. The principal office address: 7500 West Jefferson Blvd, Fort Wayne, Indiana 46804

3. The mailing address (if different): 7500 West Jefferson Blvd., Fort Wayne, Indiana 46804

4. Date of incorporation/qualification:	February 18, 1942	Document number:	840391
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5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

1200 South Pine Island Road

Plantation, Florida 33324

C T Corporation System

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.

526 E. Park Avenue

(P.O. Box or personal mailbox NOT acceptable)

Tallahasse, 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, or the corporation has been notified in writing of the change.

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 of Registered Agent)

If signing on behalf of an entity:

Traci Smith

(Typed or Printed Name)

Assistant Secretary (Capacity)

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

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