S54436 Document Number Only

CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 850-222-1092

DATE:	6	,27
		-/

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	Corporation(s) Name	<i>∙∙∙∙∙∙∙</i> ∙∙∪. ეე	**************************************
. American Ex	epress Bank L	JTD.	100 JUN 27
()Profit ()Nonprofit	()Amendment	()Merger	TEF COM
()Foreign ()LLC	()Dissolution ()Withdrawal	()Mark	ORFORATIONS AM 6: 38
()Limited Partnership ()Reinstatement ()UCC () 1 or () 3	()UBR ()Fititious Name	()Other ()Ch. RA	
***Special Instructions**	•	ALLAH.	RE O
()Certified Copy ()arts/ameds/mergers () Other-S	()Photocopies See Above	()CUS	CEIVE
(XXX)Walk in	(XXX)Pick-up	()Will Wait	# 6

Please Return Filed Stamped Copies To:

Carol Clark

Thank You!

3K 6/27

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

Pursuant to the provisions of sections 607,0502, 617,0502, the undersigned corporation organized under the laws of the	
submits the following statement in order to change its regist the State of Florida.	· · · · · · · · · · · · · · · · · · ·
1. The name of the corporation is: American Express	s Bank Ltd.
A	
2. The mailing address of the corporation is:	
200 Vessey Street, New York, NY 10285-	5005
3. Date of incorporation/qualification: 10/20/1982	Document number: 854436
4. The name and address of the current registered agent and o	ffice:
Corporation Company of M	lami
1500 Edward Ball Building	, 100 Chopin Plaza
5. The name and address of the new registered agent and office	
CT Corporation System	
c/o_CT_Corporation_System, 1200_S	outh Pine Island Road
Plantation, Florida 33324	1000
The street address of its registered office and the street addressent, as changed, will be identical.	ess of the business office of its registered
Such change was authorized by resolution duly adopted by i authorized by the board.	, ,
(Signature of an officer, chairman or vice chairman of the board)	5/1/2000
	1 (0014)
Stephen P. Norman Secretary (Printed or typed name and title)	
Having been named as registered agent and to accept service corporation, I hereby accept the appointment as registered I further agree to comply with the provisions of all statutes a performance of my duties, and I am familiar with and accept registered agent.	ne of process for the above stated agent and agree to act in this capacity. The proper and complete to the proper and complete to the obligation of my position as
Carie Bur	(Date) 4/27/3000
(Signature of Registered Agent) CONVIE BRYAN If signing on behalf of an entity: SPECIAL ASSISTANT SECRET	***************************************
(Typed or Frinted Name)	(Capacity)
* * * FILING FEE: \$35.	00 * * *
CR2E045(7/97)	
DIVISION OF CORPORATIONS P.O. BOX 6327	Tallahassee, FL 32314