DOCUMENT # B9500000287  I. Entity Name  VESTRUST SECURITIES L.P., LIMITED PARTNERSHIP									/45/ <i>E</i> 5    }}	535 <sup>39</sup> D PH 3: 41	
rincipal Place of Business 355 ALHAMBRA CIR. SUITE 1201 CORAL GABLES FL 33134  Principal Place of Business				Mailing Address 355 ALHAMBRA CIR. SUITE 1201 CORAL GABLES FL 33134  3. Mailing Address			SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Suite, Apt. #, etc. City & State			Sı	uite, Apt. #, etc.			DUE BY M	MAY 1, 200	) <b>2</b>		
			C	City & State			4. FEI Number 65-0594506			Applied Fo	
Zip		Country	Zi	ip	Coun	ntry	5. Certificate of		- \$	8.75 Additional	ible.
	6. Name	and Address of Curr	ent Registe	ered Agent			7. Name and A	ddress of New R	egistered A	gent	
THE PRENTICE-HALL CORPORATION SYSTEM, INC.						Name					
			TOTEM, IN	M, INC.		Street Addres	s (P.O. Box Number	is Not Acceptable	<del>;</del> )		
1201 HAYS STREET, SUITE 105 TALLAHASSEE FL 32301											
						City			FL	Zip Code	
										<u> </u>	
The above n	named entity	submits this stateme	nt for the pu	urpose of changing it	s registere	ed office or regis	tered agent, or both	, in the State of Fic	orida.		
SNATI (RE	·		·		s registere	ed office or regis	stered agent, or both	, in the State of Fic	orida.		
GNATURE	Signature, typed (	or printed name of registered a	agent and title if a	applicable.			stered agent, or both		DATE	TO DEDT OF STATE	
GNATURE	Signature, typed o tributions n record.	or printed name of registered a	agent and title if a	applicable.  10. Amount of Capi in FLORIDA to (	ital Contrit	butions		11. MAKE CHEC SEE REVER:	DATE K PAYABLE SE SIDE FOR	TO DEPT. OF STATE	
GNATURES	Signature, typed of tributions in record.	or printed name of registered a \$630,000.0	ogent and title if a	applicable.  10. Amount of Capi in FLORIDA to 0	ital Contrib date.	butions	ISTERED AND AC	11. MAKE CHEC SEE REVER CTIVE WITH TH	DATE  K PAYABLE  SE SIDE FOR  IS OFFICE	FEE INFORMATION	
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SIGNATURE:

ME OF SIGNING GENERAL PARTNER

1/28/2002 (305) 648-5050 Date Daytime Phone #