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P.A. Charge



DN SERVICE COMPANY.
ACCOUNT NO. : 07210000032
REFERENCE : 351421 7113721
AUTHORIZATION Spelle Man
COST LIMIT : 35.00
ORDER DATE : December 7, 2007
ORDER TIME : 10:09 AM
ORDER NO. : 351421-225
CUSTOMER NO: 7113721
CHANGE OF AGENT
NAME: SUNTRUST EDUCATION FINANCIAL SERVICES CORPORATION
SERVICES CORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX PLAIN STAMPED COPY
CONTACT PERSON: Amanda Roath

EXAMINER'S INITIALS: _

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Virginia or to change its registered office or registered agent, or both, in the State of Florida.
 The name of t The principal 	the corporation: SUNTRUST EDUCATION FINANCIAL SERVICES CORPORATION office address: 1001 SEMMES AVENUE RICHMOND, VA 23224
3. The mailing a	address (if different): 303 Peachtree Street NE 36th Floor (H. KELLY) GA 30308
	poration/qualification: 01/11/2000 Document number: F0000000159
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State:
	CT Corporation System
	1200 South Pine Island Rd
	Plántation, FL 33324
6. The name and (if changed):	Corporation Service Company 1201 Hays Street
	Corporation Service Company
	1201 Hays Street (P.O. Box NOT acceptable)
	Tallahassee, FL 32301
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, I be identical.
	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Mich	MICHELLE ARAUZ - SECRETARY (Printed or typed name and title)
of my duties, ar document is best corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change. Ition Service Company 12.14.07 (Date)
_	ehalf of an entity:
	ppet, Asst. Vice President Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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