F0000006805

ACCOUNT NO. : 072100000032

REFERENCE

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: May 3, 2001

ORDER TIME : 12:0 PM

ORDER NO. : 138376-030

CUSTOMER NO: 4709925

CUSTOMER: Mr. Aaron Guth

Lehman Brothers Inc.

3 World Financial Center

New York, NY 10285

CHANGE OF AGENT

700004191727--2

NAME:

FINANCIAL FREEDOM SENIOR

FUNDING CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

_ PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward

@ COULLIETTE MAY 0 9 2001

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607	
the undersigned corporation organized under the laws of the Stat	
submits the following statement in order to change its registered	d office or registered agent, or both, in
the State of Florida.	
1. The name of the corporation:	
FINANCIAL FREEDOM SENIOR FUNDING CORPORATION	
2. The mailing address of the corporation:	
3. Date of incorporation/qualification: December 8, 2000 D	Document number: F00000006805
4. The name and address of the current registered agent and office	LOREI LOREI LLAH
CT Corporation System	AAR 7 - 7
1200 South Pine Island Road	Y OF P
Plantation, FL 33324	D
5. The name and address of the new registered agent (if changed) (P. O. Box Not Acceptable)	
Corporation Service Company	<u> </u>
1201 Hays Street	<u> </u>
Tallahassee, FL 32301	-
The street address of its registered office and the street address agent, as changed, will be identical.	of the business office of its registered
Such change was authorized by resolution duly adopted by its b authorized by the board.	
64	4/30/0
(Signature of an officer, chairman or vice chairman of the board)	(Date)
Assistant Secretary (Printed or typed name and title)	
Having been named as registered agent and to accept service of corporation, I hereby accept the appointment as registered agent I further agree to comply with the provisions of all statutes relaperformance of my duties, and I am familiar with and accept the registered agent.	f process for the above stated nt and agree to act in this capacity. tive to the proper and complete e obligation of my position as
Corporation Service Company	
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
Carol K. Dolor	Assistant Vice President
(Typed or Printed Name)	(Capacity)
* * * FILING FEE: \$35.00 * * *	

CR2E045(9/00)