F010000000313

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
•	•	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(—		,
(Do	cument Number)	
Certified Copies	Certificates	s of Status
	···	
Special Instructions to	Filing Officer:	

Office Use Only

MONIA



400042707534

17/15/04--01038--008 **35.00

OL NOV 15 AM 11: 05



November 10, 2004

To Whom It May Concern:

Please file the enclosed change of agent form and return a date stamped copy to my attention. I have enclosed a self address envelope for your convenience.

Should you have any questions, please do not hesitate to contact me. The number I can be reached at is $1-800-235-0337 \times 118$

Sincerely,

Trací Smíth Corporate Services Manager

TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Oberlin Financial Corp. (Name of corporation) F0100000213 DOCUMENT NUMBER:__ The enclosed Statement of Change of Registered 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) 145 Baker Street (Address) Marion, OH 43302 (City/state and zip code) For further information concerning this matter, please call: Traci Smith (Area code & daytime telephone number) (Name of person) Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Amendment Section Division of Corporations Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

409 E. Gaines Street Tallahassee, FL 32399

CR2EO45(09/03)

Tallahassee, FL 32314

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

change is subm	provisions of sections 607.8	nized under the l	aws of the State of_	<u>Ohio</u>	-		-
	gistered office or registered the corporation: Oberlin Final		·				
-	-						
z. the principal	office address: 209 N. Main S		3506			<u></u>	
3. The mailing a	address (if different): 209 N.						
4. Date of incor	poration/qualification:	/12/2001	Document number	er:F01	100000213		
	d street address of the current rtment of State:	nt registered agen	t and registered offi	ce on file with the	,		
	C T Corporation System					• .	_
	1200 South Pine Island Road						
	Plantation, Florida 33324						
6. The name and (if changed):	d street address of the new r		f changed) and /or r		TALLAH	01 NOV 15	
	NRAI Services, Inc.				ASS ASS	15	1
	526 E. Park Avenue					*	
	(P.C). Box or personal mails	ox NOT acceptable)		LOR	1:0	U
	Tallahasse, Florida 32301	·			— PA	വ	
The street addr	ess of its registered office a e identical.	and the street add	lress of the busines	s office of its reg	istered ag	ent, a	3
	as authorized by resolution e corporation has been not		/ its board of direct f the change.	ors or by an offic	er so auti	norize	d by
	Signature of an officer of director)	v-	Ste	onen ke	S - C	FC	<u>) </u>
I further agree duties, and I an being filed mer	ff the appointment as registe to comply with the provision of familiar with and accept rely to reflect a change in writing of this change.	ons of all statutes the obligation of	s relative to the pro my position as reg	per and complete istered agent. O	r. if this d	locume	ent is
by: 1 0	U SMULL (Signature of Registered Agent)		111	9 LOY (Pate)	<u> </u>		<u> </u>
If signing on be	chalf of an entity:			(/			
	Traci Smith			Assistant Secre	etary		
	(Typed or Printed Name)			(Caracity)			

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