## F02000002723

(Red	questor's Name)	<del></del>
(Add	dress)	
(Ada	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	TIAW [	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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12/11/02--01003--026 \*\*35.00

## **CT** CORPORATION

December 10, 2002

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5724818 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Evans Withycombe Finance, Inc. (DE) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley\_Mitchell@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

## FILED

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

'.1508, Florida Statutes,
stered agent, or both, in
Plaza, Ste. 400, Chicago, IL 606
ber: F02000002723
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red office (if changes): P
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s office of its registered
ors or by an officer so
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he above stated o act in this capacity. per and complete f my position as
10/02
ity)

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

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314