

ACCOUNT NO. : 072100000032

REFERENCE: 654422 4391649

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: April 6, 2000

ORDER TIME : 9:27 AM

ORDER NO. : 654422-185

CUSTOMER NO: 4391649

700003206967--9

CUSTOMER: Ms. Janet Golem

Keycorp

127 Public Square, 2nd Floor

Cleveland, OH 44114

CHANGE OF AGENT

NAME: OREO CORP. OF OHIO

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ ÇERŢIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Janine Lazzarini



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

the undersigned	e provisions of sections 607.0502, 617.0502 d corporation organized under the laws of the	State of Ohio
submits the following statement in order to change its registered office or registered agent, or both, in		
the State of Flo		
1. The name of	f the corporation is: OREO CORP. OF OHIO	, , , , , , , , , , , , , , , , , , , ,
2. The mailing	address of the corporation is: 127 Public S	quare, Cleveland, OH 44114
3. Date of inco	orporation/qualification: October 27, 1993	Document number: F93000004856
	nd address of the current registered agent and	office:
	CT Corporation System	8
	1200 South Pine Island Road	
	Plantation, FL 33324	<del>3</del> 3 7
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable) .		
	Corporation Service Company	ಶಾಂತ್ರ ಕ ರ
	1201 Hays Street	₹ <del>Ş</del>
	Tallahassee, Florida 32301	0
The street add agent, as chang		dress of the business office of its registered
Such change v authorized by t	vas authorized by resolution duly adopted by	its board of directors or by an officer so
M.	Drene le	HPRI 10, 2000
	re of an officer, chairman or vice chairman of the board)	(Date)
R.J. GRUN: CK Societary (Printed or typed name and title)		
Uavina haan n	amed as registered agent and to accept service hereby accept the appointment as registered of to comply with the provisions of all statutes of my duties, and I am familiar with and accep	te of process for the above stated agent and agree to act in this capacity. relative to the proper and complete t the obligation of my position as
By:	(bull Vol	April 12, 2000
	(Signature of Registered Agent)	(Date)
If signing on behal	f of an entity:	
Carol K. Dolo		(Consolity)
	(Typed or Printed Name)	(Capacity)
* * * FILING FEE: \$35.00 * * *		

CR2EO45(7/97)