-94000003184



072100000032 ACCOUNT NO.

REFERENCE :

642291

AUTHORIZATION

COST LIMIT

ORDER DATE: June 27, 2002

ORDER TIME: 10:36 AM

ORDER NO. : 642291-455

100006131321-_8

CUSTOMER NO: 7155110

CUSTOMER: Patricia Meudt, Legal Asst

Cendant Corporation

1 Campus Drive

Parsippany, NJ 07054

CHANGE OF AGENT

NAME:

COLDWELL BANKER REAL ESTATE

CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Ta-tanisha Adams

C. Coulliste JUL 0 1 2002

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

the undersigned corporation organized under the laws of the State of _California_	
submits the following statement in order to change its registered office or registere the State of Florida.	ed agent, or both, in
1. The name of the corporation :	7A 200
COLDWELL BANKER REAL ESTATE CORPORATION	D.J.
2. The mailing address of the corporation :	AS
6 Sylvan Way, Parsippany, NJ 07054	PR OF
<u> </u>	L'S: N
 3. Date of incorporation/qualification: 06/17/1994 Document number: 4. The name and address of the current registered agent and office: 	1940000MHH4
CT Corporation System	
1200 South Pine Island Road	
Plantation, FL 33324	
5. The name and address of the new registered agent (if changed) and/or registered of (P. O. Box Not Acceptable)	office (if changed):
Corporation Service Company	
1201 Hays Street	;. <u>-</u>
Tallahassee, Florida 32301	
The street address of its registered office and the street address of the business off agent, as changed, will be identical.	
Such change was authorized by resolution duly adopted by its board of directors of authorized by the board. (Signature of an officer, chairman or vice chairman of the board) (Example 1) (Example 1) (Example 2) (Example 2	
Maureen Cullen, Attorney-in-Fact (Printed or typed name and title)	
Having been named as registered agent and to accept service of process for the acceptration, I hereby accept the appointment as registered agent and agree to act I further agree to comply with the provisions of all statutes relative to the proper aperformance of my duties, and I am familiar with and accept the obligation of my registered agent.	bove stated t in this capacity. and complete position as
Sow Graciando 06/24/2002 (Signature of Registered Agent) (Date)	
(Signature of Registered Agent) (Date) If signing on behalf of an entity:	
Lou Giaccardo Asst. Vice President	-
(Typed or Printed Name) (Capacity)	
* * * FILING FEE: \$35.00 * * *	

CR2E045(9/00)