

UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue
Tallahassee, FL 32301
(850) 681-6528

FOR PICKUP BY UCC SERVICES

OFFICE USE ONLY Cocument #)

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CORPORATION NAME	(S) AND DO	CUMENT NUMBER(S	i) (if known):
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NEW FILINGS Profit NonProfit Limited Liability	Amendr Resigna	AMENDMENTS ment ation of R.A. Officer/Director of Registered Agent	Certificate of FICTETIOUS NAME
Domestication Other	Dissolut Merger	tion/Withdrawal	FICTITIOUS NAME SEARCH
Annual Report Fictitious Name Name Reservation	Foreign Limited	Partnership atement	CORP SEARCH S S
Ordered By:			
Date:			

Florida Department of State, Sandra B. Mortham, Secretary of State

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Delaware submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1a. The name of the corporation is: 800 SOBT CORPORATION 1b. The mailing address of the corporation is: 800 Newport Center Drive #300, Newport Beach, CA 92660 Document number: F95000001510 1c. Date of incorporation:_ The name and address of the current registered agent, and office: 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable NATIONSCORP REGISTERED AGENTS, INC. 526 E. PARK AVENUE TALLAHASSEE, FL 32301 The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical. Such change was authorized by reselution duly adopted by its board of directors or by an officer so authorized by the board. (Signature of an officer, chairman or vice chairman of the board) (Printed or typed name and title) Having been named as registered agent and to accept service of process for the above stated corporation, I herebyaccept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. (Signature of Registered Agent) If signing on behalf of an entity:

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$35.00