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C T CORPORATION	SYSTEM			
Requestor's Name 660 East Jeffer	son Street			
Address Tallahassee, Fl	orida 32301		ا المام	
City State Zip	Phone	# #		-01054013
CORPOR	ATION(S) NAME]	*****35.80	} *****35.
				
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Name Availability	12-11-97	PLEA	SE RETURN EXTRA	COPY(S)
Document Examiner			FILE STAMPED	
Updater			THANKS, MELANIE	©
Verifier		12	/12	
Acknowledgment		10	Ton	
W.P. Verlfier			112 John	and
CR2E031 (1-89)				•

Florida Department of State, Jim Smith, 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: WALDEN OPERATING, INC.	
1b. Date of incorporation 6/26/95 Document number 28 B	
2. The name and address of the current registered agent and office: CSC-THE UNITED STATES CORPORATION CO.	
1201 HAYS STREET, SUITE 105, TALLAHASSEE, F _L 32301 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) C T CORPORATION SYSTEM	O
c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation, Florida	33324
The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board. MARK S. DILLINGER EXECUTIVE VICE PRESIDENT	
SIGNATURE Typed or printed name and title DFr. 0 2 1997 DATE	

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT 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 BY:	Kand a Sully	
DATE J	(Registered Agent)	
·	RANdy A. Shellay, Asst. S	`C<

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

CR2E045 (7-91) FILING FEE: \$35.00