## F95000004957 ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: REFERENCE: (Sub Account)	FCA000000005 2016133	
DATE:	11-16-99	99 N SECR
REQUESTOR NAME:	LEXIS	NOV 16 PR
ADDRESS:		ED 8 3 53 SEE, FLORIDA
TELEPHONE: (	) ( -	· ()
CONTACT NAME:	ext	· ()
CORPORATION NAME:	F95-4957	
DOCUMENT NUMBER:(if applicable)		0000030456909
AUTHORIZATION:	C. Woodigad	TALLES NO.
CERTIFIED COPY CERTIFICATE OF PLAIN STAMPED C	STATUS (1-9)	RECEIVED 99 NOV 16 MIII: 51 DEPARTMENT OF STATE DIVISION OF CORP. FLORIT
( ) Call When Ready Walk In ( ) Mail Out	( ) Call if Problem ( ) Will Wait	

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

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

submits the following states	rganized under the laws of the St nent in order to change its regist		or both, in the	=	
State of Florida.  1. The name of the corporation is: CRSI SPV 20535, INC.					
2. The mailing address of the	e corporation is: CRSI SPV 20	0535, INC.	. :	. =	
3. Date of incorporation/qu	alification: <u>10/12/1995</u>	Document number: F95000	0004957		
4. The name and address of	the current registered agent and o	office:	-	*	
	CT CORPORATION SYSTEM		99   SEOR		
<del></del>	1200 SOUTH PINE ISLAND	ROAD	FILE FAR		
5 Th	PLANTATION, FL 33324		用S o h		
5. The name and address of t	the new registered agent and offic	e: (P. O. Box Not Acceptable)			
	LEXIS DOCUMENT SERVICES	INC	⊼> <b>φ</b> □ 5		
	3953 WW KELLY ROAD	e ee	>"'చ		
. 4	TALLAHASSEE, FL 32311	,		- '	
The street address of its reg agent, as changed, will be id	istered office and the street addi	ress of the business office of its	registered		
	d by resolution duly adopted by			-	
	a Cline	11/18/99	,		
(Signature of an officer,	chairman or vice chairman of the box	ard) (Date)	<del></del>	. :	
L18A	cuprie sec.	•	·		
	or typed name and title)	(Date)	<u> </u>		
Having been named as regi. corporation, I hereby accep further agree to comply wi performance of my duties, a registered agent.	stered agent and to accept servi t the appointment as registered ith the provisions of all statutes and I am familiar with and accep	ice of process for the above stated agent and agree to act in this control of the proper and come put the obligation of my position	ted capacity. plete i as		
Le bleca Ale (Signature of Re	glstered Agent)	11/5/99 (Date)	The same areas		
f signing on behalf of an entity:		•			
REBECCA HEISLER		ASST. SECRETAL	RY	\$	
(Typed or Printe	d Name)	(Capacity)			
R2E045(4/95)		FILING FEE	Z: \$35.00		