

F97000003631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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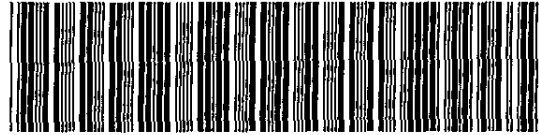
(Business Entity Name)

(Document Number)

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**PARANET CORPORATION SERVICES, INC.**

3761 Venture Drive, Suite 260  
Duluth, Georgia 30096  
770-497-9977 / 800-277-9977  
Fax 770-813-0477 / fax 800-815-0477  
E-Mail: Maggie@Paranetlegal.com

**TRANSMITTAL LETTER**

March 12, 2004

RE: LendingTree, Inc.

TO: Florida Department of State  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

FR: Maggie Ferdinand  
Paranet Job No. 04-03-0194/mf

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PLEASE FILE/SUBMIT THE FOLLOWING **CHANGE OF AGENT APPLICATION**  
ON BEHALF OF THE ABOVE COMPANY IN YOUR STATE.

UPON COMPLETION:

FAX EVIDENCE TO ME AT (800) 815-0477

REGULAR MAIL (STAMPED ADDRESSED ENVELOPE PROVIDED)

CHECK NO 83446 AMOUNT: \$35.00 ENCLOSED

**IF YOU HAVE ANY QUESTIONS, PLEASE CALL US USING OUR TOLL FREE  
NUMBER (800) 277-9977.**

**THANK YOU FOR YOUR EXCELLENT SERVICE☺**

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Lendingtree, Inc.  
(Name of corporation)

DOCUMENT NUMBER: F9700003631

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eileen Chaddock  
(Name of person)

Paranet Corporation Services, Inc.  
(Name of firm/company)

3761 Venture Drive, Suite 260  
(Address)

Duluth, GA 30096  
(City/state and zip code)

For further information concerning this matter, please call:

Eileen Chaddock at ( 800 ) 277-9977  
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

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, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Lendingtree, Inc.
2. The principal office address: Legal Department, 11115 Rushmore Drive, Charlotte, NC 28277
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 7/14/1997 Document number: F9700003631
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System  
1200 S. Pine Island Rd.  
Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.  
526 E. Park Avenue  
(P.O. Box or personal mailbox NOT acceptable)  
Tallahassee, FL 32301

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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 resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

by Keith B. Hall  
(Signature of an officer or director)

Keith B. Hall Sr VP & CFO  
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

NRAI Services, Inc.  
by: Maggie Ferdinand  
(Signature of Registered Agent)

3/11/04  
(Date)

If signing on behalf of an entity:

Maggie Ferdinand  
(Typed or Printed Name)

Asst. Sec'y.  
(Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314