

Dover, DE

Los Angeles, CA

Sacramento, CA

New York, NY

April 9, 2002

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

OLDCASTLE WESTILE, INC RE:

Doc. # F99000003081

Dear Sir or Madam:

Enclosed herewith please find an executed original and one copy of the Certificate of Change of Registered Agent and our check no. 2441 in the amount of \$35.00 for the above referenced entity. Please file and return a stamp-filed copy to me in the self-addressed stamped envelope that I have enclosed for your convenience.

If you have any questions, please do not hesitate to call.

Sincerely,

Lisa C. Harding Operations Manager

Enclosures

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

Pursuant to the	provisions of sections 607.4 corporation organized unde	0502, 617,0502, or the laws of the .	<i>607.1508, or 617.1508</i> State of Delaware	, Florida Statutes,	
the undersigned outmits the follo	corporation organized unde owing statement in order to c	r me iuws oj me i change its registe	red office or registered	d agent, or both, in	
the State of Flor					
1. The name of	the corporation:				
OLDCAST	LE WESTILE, INC.				
2. The mailing a	address of the corporation:				
1900 NW 21	Ave., Fort Lauderdale, FL	The state of the s			
3. Date of inco	rporation/qualification:	6/16/99	Document number: _	F99000003081	
4. The name an	d address of the current regis	tered agent and o	ffice:		
	NRAI Services, Inc.				
	526 E. Park Ave.			N N N N N N N N N N	
	Tallahassee	FL	32301	A APP	
5. The name an	•	Box Not Accept	able)	ffice (if changed):	
	National Corpor	ate Researc	n, Ltd., Inc.	FO	O
1406 Hays Street, Suite #2					
	Tallahassee	<u>Florida</u>	32301	D 07	
agent, as chang	ress of its registered office arged, will be identical.			•	
Such change wanthorized by	vas authorized by resolution the board.	duly adopted by	its board of directors o	r by an officer so	
Mar	e of an officer, chairman or vice chair	man of the board)		/02 Date)	
Gary P.	Hickman-Assi	stant so	acefar(
Having been n corporation, I I further agree performance o registered age	printed or typed name and no named as registered agent as hereby accept the appointm to comply with the provision of my duties, and I am familiant.	nd to accept servicent as registered ens of all statutes ar with and acce	ice of process for the a agent and agree to ac relative to the proper pt the obligation of my	bove stated t in this capacity. and complete position as	
Lisa	(Signature of Registered Agent)	Ρ	4/8/02 (Date)		
If signing on beh	lalf of an entity: (Typed or Printed Name)		V, P, (Capacity)		
	***FI	LING FEE: \$3	5.00 * * *		

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314