280932



ACCOUNT NO. : 072100000032

REFERENCE: 978549 167868A

AUTHORIZATION :

COST LIMIT

ORDER DATE : January 25, 2001

ORDER TIME: 2:48 PM

ORDER NO. : 978549

CUSTOMER NO: 167868A

CUSTOMER: Ms. Aprille M. Mitchell First Union Corporation

One First Union Center, Nc0630

Legal Division-31st Floor Charlotte, NC 28288-0630

800003617038-

CHANGE OF AGENT

NAME: JWGENESIS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY __ PLAIN STAMPED COPY

CONTACT PERSON: Sara Lea -- EXT#

G COULLIETTE JAN 3 1 2001

EXAMINER:

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

Pursuant to the provi	sions of sections 607.0502, 617.050	02, 607.1508, or 617.1508, Florida Statutes,
the undersigned corpo	ration organized under the laws of th	he State of Florida
the State of Florida.	statement in order to change its reg	gistered office or registered agent, or both, in
1. The name of the con	poration in	
JWGENESIS, INC.		
2. The mailing address	s of the corporation is: <u>10 COrpor</u> Street, Tallahassee, F	ation Service Company FL 32301
· · · · · · · · · · · · · · · · · · ·	n/qualification: 12/21/1983	
	ss of the current registered agent and	
Charle	s E. Scarlett	
980 N.	Federal Highway, Suite 210	ECR.
	aton, FL 33432	MAN TI
5. The name and addre	ss of the new registered agent and of	fice: (P. O. Box Not Acceptable)
	ation Service Company	11:50 FM
	ays Street	loring in the second se
	assee, Florida 32301)A 47
The street address of it agent, as changed, will be	s registered office and the street ado be identical.	dress of the business office of its registered
Such change was authorized by the board	rized by resolution duly adopted by	its board of directors or by an officer so
19100	eer, chairman or vice chairman of the board)	1/22/0/
Carol R. Mulle	S Vice President	
Having been named as r corporation, I hereby ac I further agree to comply performance of my dutie registered agent.	egistered agent and to accept service cept the appointment as registered a with the provisions of all statutes re s, and I am familiar with and accept	e of process for the above stated gent and agree to act in this capacity. elative to the proper and complete the obligation of my position as
By: Killerah N	Company L. S. R. D. Cer	1-31-01
(Signature	of Registered Agent)	(Date)
If signing on behalf of an entity	:	
Deborah D. Skipper	Deintad Nama	(Date)
(Typed or	Printed Name)	(Capacity)
	* * * FILING FEE: \$35	5.00 * * *
CR2EO45(7/97)		

P. O. Box 6327

TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS