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(Re	equestor's Name))			
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PICK-UP					
(Business Entity Name)					
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CT CORPORATION	_	
March 5, 2003		
Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399		DIVE ALL AND SEE FOR PARTING S
Re: Order #: 5796223 SO Customer Reference 1: Customer Reference 2:		ט עי.
Dear Secretary of State, Florida:		
Please file the attached:		
Universal Land Title Investme Change of Agent Florida	nt #1, L.L.C. (FL)	

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

· · · ·

Brigham Weir Fulfillment Specialist Brigham_Weir@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

A CCH LEGAL INFORMATION SERVICES COMPANY

Page 1 of 1

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

L01000021623

4. Document number

1. The name of the limited liability company is: Universal Land Title Investment #1, L.L.C.

2. The mailing address of the limited liability company is :

1555 Palm Beach Lakes Blvd., Ste 1000, West Palm Beach, FL 33401

12/11/01

3. Date of filing/registration in Florida

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

-	UNIVERSAL LAN	D TITLE COMPANY, INC.		うまで
		Name		ERT
	1555 Palm Beach La	akes Blvd., Ste 1000		
		Address		49 3 V
	West Palm Beach, F			1.00
	(City, State and Zip		GE P
6. The name and addres	s of the new register	ed agent and/or office:		NOT S
	C T Corporation Syst	tem	·==	
		Name		
	1200 South Pine Islan	nd Road	<u> </u>	. ,
	Florida street ad	dress (P.O. Box NOT accept	ptable)	
	Plantation	FL_33324	<u> </u>	
	Ci	ty, State and Zip		
confirmed that after the and the business office of liability company, it is h	change or changes a of the registered ager ereby confirmed tha ted liability company	zed under the laws of the S re made, the Florida street a nt will be identical. Or, in t t the change(s) was/were au y or as otherwise provided i ity company.	address of the regist he case of a Florida athorized by an affin	tered office limited rmative vote of

Secretar Heather Lydic (Printed or typed name of signee)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. C T Corporation System Gignature of Registered Agent

(Signature of Registered Agent)

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

INHS18(10/99)

FILING FEE: \$25.00

FL015- 9/27/99 C T System Online