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REGISTERED AGENT CHANGE

TRADITION TITLE COMPANY, LLC

Certificate of Status	0
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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.			
1. The name of the limited liability company is: Tradition Title Company, LLC			
2. The mailing address of the limited liability company is:			
PO Box 5403, Ft. Lauderdale, FL 33310			
12/11/2002	L02000033206		
3. Date of filing/registration in Florida	4. Document num	ber	
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:			
Gien R Gilbert			
	Name		
1750 East Sunrise Blvd.			
	Address	_	
Ft. Lauderdale, FL 33304	State and Zip	-101 F	
6. The name and address of the new registered ag	-	FILE M 8: 30	
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CT Corporation System		S P T	
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Florida street address (P.O. Box NOT acceptable)			
Florida succi address	(P.O. Box NO 1 acceptable)	95	
Plantation	FL 33324		
	ate and Zip	ν	
•			
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.			
from 15 / 50/2			
(Signature of a member or authorized representative of a member)			
James the Andrew 5013			
(Frimed or typed have of signec) 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 508, R.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. CT Corporation System PETER F. SOUTA (Signature of Registered Agent) ASSIGNITATION			
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314			
INHS18(10/99) FILING	G FEE: 525. 00		