

M01000 000950

(Requestor's Name)

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ACCOUNT NO. : 072100000032
 REFERENCE : 865728 7319193
 AUTHORIZATION : *Patricia Pizote*
 COST LIMIT : \$ 25.00

ORDER DATE : December 19, 2002
 ORDER TIME : 7:56 AM
 ORDER NO. : 865728-270
 CUSTOMER NO: 7319193
 CUSTOMER: Ms. Beverly Thurston
 Washington Mutual Finance
 8900 Grand Oak Circle
 Tampa, FL 33637-1050

CHANGE OF AGENT

NAME: WASHINGTON MUTUAL FINANCE
 ASSET HOLDINGS, LLC

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PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Carla E. Lohi

**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: WASHINGTON MUTUAL FINANCE ASSET HOLDINGS, LLC

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

8900 Grand Oak Circle, Tampa, FL 33637

April 26, 2001
3. Date of filing/registration in Florida

M01000000950
4. Document number

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

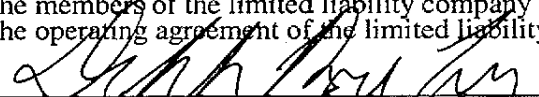
CT Corporation System
Name
1200 South Pine Island Road
Address
Plantation, FL 33324
City, State and Zip

6. The name and address of the new registered agent and/or office:

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32301
City, State and Zip

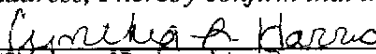
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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered 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.


(Signature of a member or authorized representative of a member)

See attached for title information
(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.

 **Cynthia L. Harris**
(Signature of Registered Agent) **as its agent**

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

SIGNATURE AND TITLE INFORMATION FOR:

WASHINGTON MUTUAL FINANCE ASSET HOLDINGS, LLC

Deborah R. Tracy, Vice President for
Washington Mutual Finance Corporation, Sole Member
for Washington Mutual Finance Asset Holdings, LLC

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