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ACCOUNT NO. : 072100000032

REFERENCE: 950449

1678682

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: November 1, 2004

ORDER TIME : 10:21 AM

ORDER NO. : 950449-200

CUSTOMER NO: 167868A

CUSTOMER: Ms. Carol R. Mullis

Wachovia Corporation

One Wachovia Center, Nc0630 301 South College Street-30th Charlotte, NC 28288-0630

CHANGE OF AGENT

NAME: OMNISERVE REAL ESTATE

INFORMATION SERVICES, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _ PLAIN STAMPED COPY

CONTACT PERSON: Justin Cheshire

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

Fursuant 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: OMNISERVE REAL ESTATE INFORMATION SERVICES, LLC
2. The mailing address of the limited liability company is:
12854 Kenan Drive, Suite 222, Jacksonville, FL 32258
June 28, 2001 M01000001466
3. Date of filing/registration in Florida 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:
C T Corporation System
Name 3.0 2
1200 South Pine Island Road
Address
Plantation, FL 33324 نورتي دي المحادث
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
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. Mattheward (Signiture of a member or authorized representative of a member)
Maureen Cullen, Attorney In Fact
(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.
(Signature of Registered Agent) Michelle R. Vannoy, Asst. Vice President

FILING FEE: \$25.00

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

INH\$18(10/99)