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DIVISION OF DURFORATION 04 APR -1 AN IC 50



ACCOUNT NO. : 07210000032

REFERENCE :

519214

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: March 24, 2004

ORDER TIME: 9:15 AM

ORDER NO.: 519214-030

CUSTOMER NO: 5142120

CUSTOMER: Ms. Rebecca Fisher-mac X2401-0

Wells Fargo Home Mortgage, Inc

1 Home Campus

Des Moines, IA 50328-0001

FOREIGN FILINGS

NAME:

COMMUNITY RESIDENTIAL MORTGAGE

SERVICES, LLC

XX PROFIT XX____ CORPORATE LIMITED PARTNERSHIP NON-PROFIT

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY ____ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER:

OF THE STATE OF TH

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

| 1. | Name of limited liability company as it appears on the records of the Florida Department of State: Community Residential Mortgage Services, LLC | | |
|----|--|--|--|
| 2. | Jurisdiction of its organization: Delaware | | |
| 3. | Date authorized to do business in Florida: 09/25/2003 | | |
| | SECTION II (4-7 complete only the applicable changes) | | |
| 4. | If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization?3/18/04 | | |
| 5. | . New name of the limited liability company: | | |
| Re | esidential Community Mortgage Company, LLC | | |
| 6. | If the amendment changes the period of duration, indicate new period of duration: | | |
| 7. | If the amendment changes the jurisdiction of organization, indicate new jurisdiction: | | |
| 8. | If the amendment corrects any false statement, indicate the statement being corrected and the correction: | | |
| 9. | Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized. Signature of a member or the authorized representative of a member | | |

Filing Fee: \$25.00

Typed or printed name of signee

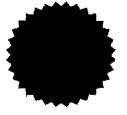
Karolyn Baker, Authorized Member

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "COMMUNITY RESIDENTIAL MORTGAGE SERVICES, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "RESIDENTIAL COMMUNITY MORTGAGE COMPANY, LLC", THE EIGHTEENTH DAY OF MARCH, A.D. 2004, AT 5:43 O'CLOCK P.M.

AND I DO HERBBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



Warriet Smith Hindson Harriet Smith Windson, Secretary of State

AUTHENTICATION: 3011512

DATE: 03-25-04

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