## M94888

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GCA LAW OFFICES HONIGMAN MILLER SCHWARTZ AND COHN 2290 FIRST NATIONAL BUILDING 660 WOODWARD AVENUE		Office Use Only	
DETROIT, MICHIGAN 48226-35	83	ER(S), (if known):	i., 1= _ ;
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4. (Corporation	n Name)	Document #)	
	ick up time  Till wait Photocopy	Certificate of Status	
NEW FILINGS	AMENDMENTS		300
Profit	Amendment		1.150
NonProfit	Resignation of R.A., Officer/D	irector	À
Limited Liability	Change of Registered Agent		
Domestication	Dissolution/Withdrawal		
Other	Merger		
OTHER FILINGS  Annual Report	REGISTRATION/. QUALIFICATION	PAN	
Fictitious Name	Foreign Limited Partnership	T 4000 C	·
Name Reservation	Dilling I and distribution in the state of t		)

Examiner's Initials

Reinstatement Trademark

Other

CR2E031(1/95)

## Florida Department of State, Jim Smith, Secretary of State

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.				
1a. The name of the corporation is: HOMISCO Credit Corp.	,			
1b. Date of incorporation August 17, 1988 Document number M 94888				
2. The name and address of the current registered agent and office:				
HOMISCO Incorporation, Inc., 222 Lakeview Avenue, Suite 800, West Palm Beach, FL 3340	1			
3. The name and address of the new registered agent and office:  (P.O. Box Not Acceptable)  C T CORPORATION SYSTEM				
c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation, Prorise 33324				
The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.				
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.				
David Roback, President and Treasurer  SIGNATURE  S-13.98  David Roback, President and Treasurer  Typed or printed name and title				
DATE				
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.				
C T CORPORATION SYSTEM  SIGNATURE BY: MINISTED	· ; ; ; ;			
(Registered Agent) MARC 6 16615-ASST  DATE	•			

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

CR2E045 (7-91) (FIA. - 2194 - 3/4/92) **FILING FEE: \$35.00**