

101000011882

**Florida Department of State
Division of Corporations
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**REGISTERED AGENT CHANGE
U.S. HOME MORTGAGE CORPORATION**

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**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, this
statement of change is submitted for a corporation organized under the laws of the State of FLORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: U.S. HOME MORTGAGE CORPORATION
2. The principal office address: 700 NW 107TH AVENUE, SUITE 400, MIAMI, FL 33172
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/01/2001 Document number: P01000011882
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

BENJAMIN P. BUTTERFIELD

700 N.W. 107TH AVENUE, SUITE 400

MIAMI FL 33172

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

CT CORPORATION SYSTEM

1200 S. PINE ISLAND ROAD

(P.O. Box NOT acceptable)

PLANTATION, FL 33324

The street address of its registered office 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, or the corporation has been notified in writing of the change.


(Signature of officer or director)

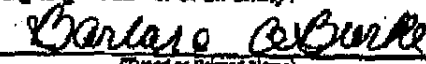
VIRGINIA S. CASAGRANDE, VICE PRESIDENT
(Printed or typed name of officer)

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. Or, if this
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the
corporation has been notified in writing of this change.

(Signature of Registered Agent)

4-6-05
(Date)

If signing on behalf of an entity:


(Typed or Printed Name)

BARBARA A. BURKE

SPECIAL ASSISTANT SECRETARY. FILING FEE: \$33.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

TOTAL P.02