

ACCOUNT NO. : 072100000032

REFERENCE : 156390

7231078

AUTHORIZATION

COST LIMIT

ORDER DATE: May 18, 2001

ORDER TIME : 2:43 PM

ORDER NO. : 156390-120

CUSTOMER NO: 7231078

CUSTOMER: Ms. Carla Bretz

Wachovia Corportion 18th Floor Legal Dept.

1426 Main Street Columbia, SC 29226

## CHANGE OF AGENT

500004288775--7

NAME: WACHOVIA SECURITIES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY

\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Ta-tanisha Adams

## 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	a Statutes,
the undersigned corporation organized under the laws of the State of North Carolina	
submits the following statement in order to change its registered office or registered agent, of the State of Florida.	or both, in
1. The name of the corporation is:  WACHOVIA SECURITIES INC.	· · · · · · · · · · · · · · · · · · ·
The state of the s	- 7 T
2. The mailing address of the corporation is: 201 North Tryon Street	<u> </u>
Charlotte, NC 28202	· · · · · · · · · · · · · · · · · · ·
3. Date of incorporation/qualification: May 9, 1985 Document number: P05949	
4. The name and address of the current registered agent and office:	
CT Corporation System	
1200 South Pine Island Road	3 9
Plantation, FL 33324	= _ =
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)	7 Z
Corporation Service Company	2 1
1201 Hays Street	<b>≅</b> □
Tallahassee, FL 32301	42
The street address of its registered office and the street address of the business office of its reagent, as changed, will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an age	icer so
authorized by the board.	,
Situative of an officer desired state of the	And the second state of th
(Date)	
MICHAEL D. HEARN, Secretary	and the second seco
(Printed or typed name and title)	
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity 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.	1)
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 the proper and complete	<b>/.</b>
By: Wellorah W. Skipper) 5-18-01	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
DEBORAH D. SKIPPER	-
(Typed or Printed Name) Assistant Vice President (Capacity)	
* * * FILING FEE: \$35.00 * * *	
CR2EO45(7/97)	
DIVISION OF CORPORATIONS P. O. BOX 6327 TALLAHASSEE, FL 32314	

TALLAHASSEE, FL 32314