



ACCOUNT NO. :

072100000032

REFERENCE :

COST LIMIT : \$ 35.00

ORDER DATE: June 27, 2002

ORDER TIME : 10:38 AM

ORDER NO. : 642291-465

CUSTOMER NO: 7155110

700006131367

CUSTOMER: Patricia Meudt, Legal Asst

Cendant Corporation

1 Campus Drive

Parsippany, NJ 07054

CHANGE OF AGENT

NAME: ERA GENERAL AGENCY CORPORATION

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

	e provisions of sections 607.0502, 617.05			rida Sta	itutes,	
	d corporation organized under the laws of			7-	47. :	
*	owing statement in order to change its re	gistered office or t	egisterea age	nt, or oc	oin, in	
the State of Flo	the corporation:					
	- · · · · · · · · · · · · · · · · · · ·			Žír Ľ	2002	
	AL AGENCY CORPORATION		·		<u> </u>	- nt
2. The mailing address of the corporation:				SS	1	7
1 Campus	Dr., Parsippany, NJ 07054		· · · · · · · · · · · · · · · · · · ·	<u> </u>		
3. Date of inco	rporation/qualification: 05/28/1986	Document n	umber: <u>P1024</u>	<u> </u>	₹	_
4. The name an	d address of the current registered agent ar	nd office:		ATE)RIDA	: 53	
	CT Corporation System	<u> </u>				
	1200 South Pine Island Road				_	
	Plantation, FL 33324	<u> </u>				-
5. The name an	d address of the new registered agent (if cl (P. O. Box Not Acc	nanged) and/or reg ceptable)	istered office ((if chang	ged):	
	Corporation Service Company					, <u></u>
	1201 Hays Street	<u> </u>	 -	-	-	
	Tallahassee, Florida 32301					ж.
agent, as chang	ress of its registered office and the street a ged, will be identical.					
Such change wanthorized by	vas authorized by resolution duly adopted the board.	by its board of dir	ectors or by a	n office	r so	
	auren Culle		06/24/2002 (Date)		- ; ···	
(Signatyfe	of an officer, chairman or vice chairman of the board)		(Date)			
Maureen Culler	n, Attorney-in-Fact					
	(Printed or typed name and title)		Com the above o	tatad		
corporation, I	amed as registered agent and to accept so hereby accept the appointment as registe to comply with the provisions of all statu of my duties, and I am familiar with and a nt.	rea agent ana agr tes relative to the	ee to act in in proper and co	is capac omplete	ity.	_ <u></u>
	4	05/0	4/2002			
Jour 1	(Signature of Registered Agent)	(Dat	24/2002 e)		- ··· ·	
If signing on beh	alf of an entity:					-
Lou Giaccard	O. Driedd March	Asst. Vice P	resident Capacity)		۔ سمت	
	(Typed or Printed Name)	(0	oupavity)			
* * * FILING FEE: \$35.00 * * *						

CR2E045(9/00)