## P15294 ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA00000005
REFERENCE: 1265057-16 (SUB ACCT.)
DATE: 4-7 2000021350226
REQUESTER NAME: LEXIS DOCUMENT SERVICES
ADDRESS: P.O. BOX 2969  SPRINGFIELD, ILLINOIS 62708  ADDRESS: P.O. BOX 2969  ADDRESS: P.O. BOX 2
AUTHORIZATION:  CERTIFIED COPY (1-9) CERTIFICATE OF STATUS (1-9) PLAIN STAMPED COPY  () CALL WHEN READY () CALL IF PROBLEM () AFTER 4:30 WALK IN () WILL WAIT () PICK-UP  () MAIL OUT (IF APPLICABLE)

## Florida Department of State, Sandra B. Mortham, 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 TEXAS 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: FIRSTPLUS FINANCIAL, INC. 1250 W. Mockingbird Lane 1b. The mailing address of the corporation is: \_ Dallas, Texas 75247-4902 1c. Date of incorporation: 7-22-87 Document number: 2. The name and address of the current registered agent and office: CT CORPORATION SYSTEM 1200 South Pine Island Rd. Plantation, FL 33324 3. The name and address of the new registered agent and office:(P.O. Box Not Acceptable) LEXIS DOCUMENT SERVICES, INC. 3953 WW Kelley Road Tallahassee, FL 32311 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. (Signature of an officer, chairman or vice chairman of the board) Tenenholtz. Scretary, Senior Vice Pres. (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. 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. If signing on behalf of an entity: Lisa James As Agent

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

FILING FEE: \$35.00

(Typed or Printed Name)