

FILED 02 JUL -2 PH 1:18

ACCOUNT NO. : 072100000032

REFERENCE :

642291

7155110

AUTHORIZATION

ORDER DATE: June 27, 2002

ORDER TIME: 10:58 AM

ORDER NO. : 642291-610

CUSTOMER NO: 7155110

000006150860--0

CUSTOMER: Patricia Meudt, Legal Asst

Cendant Corporation

1 Campus Drive

Parsippany, NJ 07054

## CHANGE OF AGENT

NAME:

WIZCOM INTERNATIONAL LTD.,

CO.

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	
the undersigned corporation organized under the laws of the Stat	
submits the following statement in order to change its registered	l office or registered agent, or both, in
the State of Florida.	
1. The name of the corporation:	
WIZCOM INTERNATIONAL, LTD., CO.	
2. The mailing address of the corporation:	2
6 Sylvan Way, Legal Dept., Parsippany, NJ 07054	me 3
3. Date of incorporation/qualification: 07/25/1989 [	Document number: P25314
4. The name and address of the current registered agent and office	e: RDA 8
C T Corporation System	
1200 South Pine Island Road	
Plantation, FL 33324	
5. The name and address of the new registered agent (if changed) (P. O. Box Not Acceptable)	
Corporation Service Company	
1201 Hays Street	and the state of t
Tallahassee, Florida 32301	
The street address of its registered office and the street address agent, as changed, will be identical.	of the business office of its registered
Such change was authorized by resolution duly adopted by its bauthorized by the board.	ooard of directors or by an officer so
Maryen (ulle_	06/24/2002
(Signature of an officer, chairman or vice chairman of the board)	(Date)
Maureen Cullen, Attorney-in-Fact	
(Printed or typed name and title)	<del></del> , <sub>=</sub> ,,,,,,,,,, _
Having been named as registered agent and to accept service of corporation, I hereby accept the appointment as registered age I further agree to comply with the provisions of all statutes relaperformance of my duties, and I am familiar with and accept the registered agent.	nt ana agree to act in this capacity.  Itive to the proper and complete
Land Hamanalo	06/24/2002
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
	st. Vice President (Capacity)
(Typed or Printed Name)	(Capacity)

\* \* \* FILING FEE: \$35.00 \* \* \*

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