

ACCOUNT NO.

113794 REFERENCE :

7231078

AUTHORIZATION

COST LIMIT

ORDER DATE: April 12, 2001

ORDER TIME: 11:37 AM

ORDER NO. : 113794-065

CUSTOMER_NO: 7231078

400004008564--5

CUSTOMER: Ms. Carla Bretz

Wachovia Corportion 18th Floor Legal Dept.

1426 Main Street Columbia, SC 29226

CHANGE OF AGENT

NAME: WACHOVIA AUTO LEASING COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Sara Lea

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0	9502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under	the laws of the State of Georgia
submits the following statement in order to c	hange its registered office or registered agent, or both, in
the State of Florida.	
1. The name of the corporation is: WACHOVIA AUTO LEASING COMPANY	
WACHOVIA AUTO LEASING COMPANY	
2. The mailing address of the corporation is:	101 North Cherry Street
Winston-Salem, NC 27102	· -
3. Date of incorporation/qualification: August	24 1995
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 The name and address of the current register 	red agent and office:
CT Corporation System	AHU API T
1200 South Pine Island Roa	
Plantation, FL 33324	on and the second of the seco
5. The name and address of the new registered	l agent and office: (P. O. Box Not Acceptable)
Corporation Service Compar	ny DATE 22
1201 Hays Street	
Tallahassee, FL 32301	
The street address of its registered office and agent, as changed, will be identical.	the street address of the business office of its registered
Such change was authorized by resolution du authorized by the board.	ly adopted by its board of directors or by an officer so
- P. P. 1	N . O . C
(Signature of an officer, chairman or vice chairman	an of the board) (Date)
T. PARKIN HUNTER, Secretary (Printed or typed name and title	
Having been named as registered agent and to	accept service of process for the above stated as registered agent and agree to act in this capacity. If all statutes relative to the proper and complete
Corporation Service Company.	:6.12-01
By: Delional W. Skippw (Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	` '
DEBORAH D. SKIPPER	Assistant Vice President
(Typed or Printed Name)	(Capacity)
* * * FILING FEE: \$35.00 * * *	

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