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SECRETARY OF STATE
TAIL ANASSEE, FLORIDA

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DIVISION OF CURL CITATION

C. Coulliste DEC 1 6 2003



REFERENCE : 358534 7410679 AUTHORIZATION : COST LIMIT : ORDER DATE: December 12, 2003 ORDER TIME: 3:08 PM ORDER NO. : 358534-005 CUSTOMER NO: 7410679 CUSTOMER: Ms. Candy Laplante Ms. Candy Laplante Suite 130 32125 Solon Road Solon, OH 44139 CHANGE OF AGENT NAME: CREDEX AUTO LEASING & FINANCE, INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY CONTACT PERSON: Carla E. Lohi -- EXT# 1132 EXAMINER:

ACCOUNT NO. : 072100000032

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

•		ıt of order
1. The name of the corporation: CREDEX AUTO	LEASING & FINANCE, INC.	
2. The principal office address: 32125 S	Solon Rd., Suite # 130 H 44139	
3. The mailing address (if different):		
4. Date of incorporation/qualification: 05	29 98 Document number: P9800049084	
5. The name and street address of the current reg Florida Department of State:	gistered agent and registered office on file with the	
Lee Ben	ton Sayler P.A.	
1001 N.	US Highway Ope Stet 702	
	FL 33477 PS 3	
6. The name and street address of the new registe (if changed):	ered agent (if changed) and /or registered office	FIL
Corporation Service Co	ompany Eq.	ED
1201 Hays Street	9; 2	
Tallahassee, FL 32301	or personal mailbox NOT acceptable)	
The street address of its registered office and the changed will be identical.	he street address of the business office of its registered agent, as	;
	y adopted by its board of directors or by an officer so authorized in writing of the change.	
Mruin Lolux (Signature of all officer of director)	Lorraine Dodero Presider	<u>t</u>
I hereby accept the appointment as registered of I further agree to comply with the provisions of duties, and I am familiar with and accept the obcing filed merely to reflect a change in the rest been notified in writing of this change.	(Printed or typed name and title) agent and agree to act in this capacity. If all statutes relative to the proper and complete performance of the properties of th	of my ent is as
Corporation Service Jompany By: Surface (Signature of Registered Agent)	12/12/03 (Date)	
If signing on behalf of an entity:		
SUSAN P. CCARR	AJ5T. U.P	
(Typed or Printed Name)	(Capacity)	

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