

ACCOUNT NO. : 072100000032

REFERENCE: 782451 5028971

AUTHORIZATION :

COST LIMIT :

ORDER DATE: April 15, 1998

ORDER TIME: 10:20 AM

ORDER NO. : 782451-155

CUSTOMER NO: 5028971

000002497830--6

CUSTOMER: Ms. Kyndall Potts

The Bisys Group, Inc.

Suite 1000

3435 Stelzer Road

Columbus, OH 43219-8026

CHANGE OF AGENT

NAME: CHS INSURANCE SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Deborah Schroder

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Florida Department of State, Sandra B. Mortham, Secretary of State

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

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 DELAWARE
submits the following statement in order to change its registered office or registered agent, or both, in the
State of Florida.
1. The name of the corporation is: CHS INSURANCE SERVICES, INC.
2. The mailing address of the corporation is: 3435 STELZER ROAD, SUITE 1000
COLUMBUS OH 43219-8026
3. Date of incorporation/qualification: 10/14/94 Document number: F 940000 5338 (8
4. The name and address of the current registered agent and office:
CT CORPORATION SYSTEM
PLANTATION, FL 33324
PLANTATION, FL 33324
5 The name and address of the new registered agent and office; IP. U. Box Not Acceptable 1737
Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301
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.
1/ 1/ 1/ 1/ 1/25/3/98
(Signature of an officer, chairman or vice chairman of the board) (Date)
DEANIS SHEEHAN 25/3/98
Printed or typed name and title) (Date)
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.
Vicki Schreiber 3/31/98
(Signature of Registered Agent) (Date)
If signing on behalf of an entity: Vicki Schreiber
CORPORATION SERVICE COMPANY COST VICE Resident
(Typed or Printed Name) (Capacity)