## F01000003782

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

R.A. Change

**6. Coultiette** SEP 2 4 2,007

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Vision Funding Corp.  (Name of Corporation)
DOCUMENT NUMBER: F01000003782
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
John H. McCorvey, Jr., Esq. (Name of Contact Person)
John H. McCorvey, Jr., P.L. (Firm/Company)
4595 Lexington Avenue, Suite 100 (Address)
Jacksonville, Florida 32210 (City/State and Zip Code)
For further information concerning this matter, please call:
John H. McCorvey, Jr., Esq. at (904) 387-5400, Ext. 407 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



September 11, 2007

JOHN H. MCCORVEY, JR, ESQ 4595 LEXINGTON AVE., STE. 100 JACKSONVILLE, FL 32210

SUBJECT: VISION FUNDING CORP.

Ref. Number: F01000003782

We have received your document for VISION FUNDING CORP. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You will need to have signatures in areas needed and also complete application before retuning for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Document Specialist

Letter Number: 107A00053815

MECEIVED

2007 SEP 21 AM 8: 00

SECRETARY OF STATE



Douglas J. Milne
\*John H. McCorvey, Jr.
\*Ashley McCorvey Myers
Sandra M. Ralston
Ronald T. Buckingham, Retired

\*Certified Circuit Civil Mediator \*Board Certified Marital and Family Law

September 19, 2007

Florida Department of State Division of Corporations Attn: Cheryl Coulliette, Document Specialist P.O. Box 6327 Tallahassee, Florida 32314

Re:

Change in Registered Agent - Vision Funding Corp.

Reference Number F01000003782

Dear Ms. Coulliette:

Pursuant to your letter dated September 11, 2007, a copy of which is enclosed, attached please find an original Statement of Change of Registered Agent for Corporations for filing in connection with the above-referenced number for Vision Funding Corp.

Please contact us if you have any questions, or need any additional information.

Sincerely,

Michele Pena

Paralegal to John H. McCorvey, Jr., Esq.

michele Pena

JHM/mp Enclosures

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, hange is submitted for a corporation organized under the laws of the State of Delaws der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation: Vision Funding Corp.	
	al office address: 3733 Crown Point Rd, Jacksonville, Florida 32257	
3. The mailing a	address (if different):	
4. Date of incor	orporation/qualification: 07/17/2001 Document number: F0100000378	2
	nd street address of the current registered agent and registered office on file with the artment of State:	
	Dale A. Beardsley	·
	12 East Bay Street	O7 S SEC
	Jacksonville, Florida 32202 US	EP 2
6. The name and (if changed):		RY OF STATE SSEE. FLORIE
	John H. McCorvey, Jr., Esq.	器品
	4595 Lexington Avenue, Suite 100  (P.O. Box NOT acceptable)	V
	Jacksonville, Florida 32210	
The street addr as changed wil	ress of its registered office and the street address of the business office of its regist	ered agent,
Such change w authorized by t	was authorized by resolution duly adopted by its board of directors or by an officer the board, or the orporation has been notified in writing of the change.	so
(Signati	ature of all officer or director)  Russe (Lo Valle)  (Printed or typed name and title)	Pus
\sh.	of the appointment as registered agent and agree to act in this capacity, eto comply with the provisions of all statutes relative to the proper and complete p and I am familiar with and accept the obligation of my position as registered agent eing filed merely to reflect a change in the registered office address, I hereby confict as been notified in writing of this change.  Signature of Registered Agent)  Signature of Registered Agent)	erformance Or, if this rm that the
•	behalf of an entity:	
	(Typed or Printed Name)	

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