

FO4000000481

(Requestor's Name)

(Address)

(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R. A. Charge

C. Coultette SEP 24 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Vision Impact Corp.

(Name of Corporation)

DOCUMENT NUMBER: F04000000481

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.

(Name of Contact Person)

at (904) 387-5400, Ext. 407

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 11, 2007

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

SUBJECT: VISION IMPACT CORP.
Ref. Number: F04000000481

We have received your document for VISION IMPACT 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):

Please complete your application including signatures before returning 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: 907A00053816

RECEIVED
2007 SEP 21 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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 Impact Corp.
Reference Number F04000000481

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 Impact Corp.

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

Sincerely,

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

JHM/mp
Enclosures

**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, this statement of change is submitted for a corporation organized under the laws of the State of Ohio in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Vision Impact Corp.
2. The principal office address: 3733 Crown Point Rd, Jacksonville, FL 32257
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/27/2004 Document number: F04000000481
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T Corporation System

1200 South Pine Island Road

Plantation, FL 33324 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

John H. McCorvey, Jr., Esq.

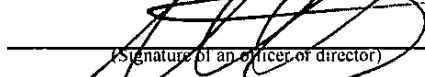
4595 Lexington Avenue, Suite 100

(P.O. Box NOT acceptable)

Jacksonville, Florida 32210

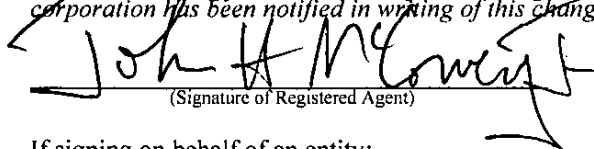
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.


(Signature of an officer or director)

LUSS-ELWUS, SUP
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

9/14/07
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA