## F63477 ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA000000005  REFERENCE: 2016133 (Sub Account)  DATE: 11-16-99  REQUESTOR NAME: LEXIS  ADDRESS:	FILED  99 NOV 16 PN 1: 21  SECRETARY OF STATE TALLAHASSEE, FLORIDA
TELEPHONE: () () ext () ext (	) ) 100030457327
DOCUMENT NUMBER:  (if applicable)  AUTHORIZATION:  CERTIFIED COPY (1-9)  CERTIFICATE OF STATUS (1-9)  PLAIN STAMPED COPY  (1-9)	RECEIVED  99 NOV 16 AM 11: 44  DEPARTMENT OF STATE DEPARTMENT OF STATIONS OF CORPORATIONS OF TALLAHASSEE, FLORIDA
( ) Call When Ready ( ) Call if Problem ( ) Walk In ( ) Will Wait ( ) Hail Out	( ) After 4:30 ( ) Pick Up

C. COULLIETTE NOV 1 7 1999

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

## 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				
			2. The mailing address of the corporation is	s: 6954 AMERICANA PARKWAY REYNOLDSBURG, OH 43068
			3. Date of incorporation/qualification: 01	/18/1982 Document number: F63477
4. The name and address of the current reg	istered agent and office:			
CT CORPO	RATION SYSTEM			
1200 SOU	TH PINE ISLAND ROAD 25 39			
PLANTATIO	ON, FL 33324			
5. The name and address of the new register	ered agent and office: (P. O. Box Not Acceptable)			
LEXIS DOO	CUMENT SERVICES INC			
3953_WW I	CELLY ROAD			
TALLAHAS	GEE, FL 32311			
The street address of its registered office agent, as changed, will be identical.	and the street address of the business office of its registered			
Klea Curu				
(Signature of an officer, chairman or vi	ce chairman of the board) (Date)			
US andi				
corporation, I nereby accept the appoint I further agree to comply with the provis performance of my duties, and I am fami	and title)  and to accept service of process for the above stated  ment as registered agent and agree to act in this capacity.  ions of all statutes relative to the proper and complete  liar with and accept the obligation of my position as			
registered agent.  (Signature of Registered Agent	11/5/99 (Date)			
If signing on behalf of an entity:	· · · · · · · · · · · · · · · · · · ·			
REBECCA HEISLER	ASST. SECRETARY			
(Typed or Printed Name)	(Capacity)			
CR2E045(4/95)	FILING FEE: \$35.00			