

ACCOUNT NO. : 072100000032

REFERENCE : 675087

140764A

AUTHORIZATION :

COST LINIT : . PREPAID

ORDER DATE: September 6, 1995

ORDER TIME : 11:21 AM

ORDER NO. : 675087

CUSTONER NO:

140764A

900001578749 -09/06/95--01060--016 \*\*\*\*\*70.00 \*\*\*\*\*70.00

W95-17923

CUSTOMER: Linda Bittner, Legal Asst

American Ophthalmic, Inc.

Suite 600

250 South Park Avenue Winter Park, FL 32789

#### FOREIGN FILINGS

MAHE:

AMERICAN OPHTHALMIC OF

ALABAMA, INC.

XXX

PROFIT

NON-PROFIT

CORPORATE

LIMITED PARTNERSHIP

XXX QUALIFICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

1201 HAYS STREET

TALLAHAMER, FL 32301
904-222-0393 FAX

800-142-8086

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ORDER DATE: September 6, 1995

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JJ

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CUSTOMER NO: 140764A

CUSTOMER: Linda Bittner, Legal Asst

American Ophthalmic, Inc.

Suite 600

250 South Park Avenue Winter Park, FL 32789

#### FOREIGN FILINGS

MANE: AMERICAN OPHTHALMIC OF ALABAMA, INC.

XX PROFIT CORPORATE
LIMITED PARTMERSHIP

XX QUALIFICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICAS

CONTACT PERSON: Karen B. Ro W/WHX

#### TRANSMITTAL LETTER

TO: QUALIFICATION/REGISTRATION SECTION DIVISION OF CORPORATIONS

SECRETARY OF STATE SECRETARY OF CORPORATION OF STATE STATE STATE STATE SECRETARY OF SECRETARY OF

SUBJECT: American Ophthalmic of Alabama, Inc.

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Kathryn Sweers
American Ophthalmic, Inc.
250 South Park Avenue, Suite 600
Winter Park, Florida 32789

Should you need to call someone concerning this matter, please call:

Kathryn Sweers at 407/647-5000.

COURIER ADDRESS: Qualification/Registration Sec. 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 332314



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 6, 1995

**CSC NETWORKS** 

SUBJECT: AMERICAN OPTHALMIC OF ALABAMA, INC.

Ref. Number: W95000017923

SECRETARY OF STATE STATE OF CORPORATIONS

We have received your document for AMERICAN OPTHALMIC OF ALABAMA, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$2400.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business or conducting affairs in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business or conducting its affairs in Florida prior to the year the application was submitted did not constitute transacting business or conducting affairs pursuant to section 607.1501 or 617.1501, Florida Statutes.

If you have any questions concerning the filing of your document, please call (904) 487-6097.

Michael Mays Document Specialist

Letter Number: 995A00041234



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 24, 1995

**CSC NETWORKS** 

SUBJECT: AMERICAN OPTHALMIC OF ALABAMA, INC.

Ref. Number: W95000017923

SECRETARY OF STATE
DIVISION OF CORPORATIONS

We have received your affidavit concerning the date first transacted business and an electronic account deposit for the \$1200.00 penalty; however, the document has still not been filed and is being returned. Please forgive us for failing to mention these needed corrections in our previous letter.

The signature on line 13 and the person listed on line 14 are not the same. Please amend accordingly.

Also, the registered agent listed should probably be the CORPORATION SERVICE COMPANY.

The registered agent designated must be an active Florida corporation or a foreign corporation authorized to transact business in Florida. Please correct the document.

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 (904) 487-6095.

Jennifer Sindt Document Examiner

Letter Number: 195A00047699

STATE OF FLORIDA )

COUNTY OF ORANGE )

STATE OF FLORIDA (SEC.)

SEPTIMENTAL PROPERTY OF COUNTY OF ORANGE (SEC.)

BEFORE ME, the undersigned authority, an officer duly authorized to administer oaths and take acknowledgements, personally appeared MICHAEL E.GRUBBE, who, after being first duly sworn, deposes and says:

- 1. I am over the age of eighteen and have personal knowledge of the facts set forth herein.
- 2. Since May 1994, I have been the Vice President of Management Information Services and South East Operations for American Ophthalmic, Inc. 250 South Park Avenue, Suite 600, Winter Park, 32789.
- 3. In my position as Vice President Management Information Services and South East Operations, I am responsible for the management and operations of all facilities located in Florida and Alabama, including American Ophthalmic of Alabama, Inc.
- 4. American Ophthalmic of Alabama, Inc. did not conduct business in Florida, until May 26,1994.
- 5. On May 26, 1994 American Ophthalmic of Alabama, Inc. for the first time rented space for two half-days each month in a facility located within the state of Florida. At no earlier time did American Ophthalmic of Alabama, Inc. conduct business in Florida.

FURTHER AFFIANT SAITH NOT.

MICHAEL E. GRUBBE

|                                                                                                                              | /                                                                                |
|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| The foregoing instrument was of September, 1995, by MICHAEL E. GRUBBE                                                        |                                                                                  |
|                                                                                                                              | fication and did (did not) take an oath.                                         |
| MICHELLE SUE MATHEY My Comm Exp. 7/09/96 My Comm Exp. 7/09/96 My Comm Exp. 7/09/96 No. CC213844 My Parametrican 11 offer Lo. | Notary Signature)  Notary Name Printed)  NOTARY PUBLIC  Commission No. CC 213844 |

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1,               | Name of Corporation                                                                         | oama. Inc.                         |             |          |
|------------------|---------------------------------------------------------------------------------------------|------------------------------------|-------------|----------|
| 2.               | Alabama State of Incorporation                                                              | 3. <u>59-3193414</u><br>FEI Number |             |          |
| 4                | June 28, 1993 Date of Incorporation                                                         | 5. Perpetual Duration              | 95          | SIAID    |
| 6.               | June 28, 1993  Date Transacting Business in Florida                                         |                                    | SEP -6      | CRETARY  |
| 7.               | American Ophthalmic of 250 South Park Avenue. Winter Park. FL 32789 Current Mailing Address |                                    | የዝ 4: 50    | OF STATE |
| 8.               | To transact any lawful busines Purpose                                                      | 5 <u>S</u>                         |             |          |
| 9.<br>1 <u>0</u> |                                                                                             | COMPANY en B. Rozar, as agent      | <del></del> |          |
|                  |                                                                                             | <b>→</b>                           |             |          |

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State of other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

#### 12. Names and addresses of officers and/or directors:

#### A. DIRECTORS

Mitchell B. Billing 250 South Park Avenue, Suite 600 Winter Park, Florida 32789

Thomas R. Whatley, Jr. 250 South Park Avenue, Suite 600 Winter Park, Florida 32789

#### **B. OFFICERS**

President - Michael E. Grubbe 250 South Park Avenue, Suite 600 Winter Park, Florida 32789

Vice President - Mitchell G. Billing 250 South Park Avenue, Suite 600 Winter Park, Florida 32789

Vice President - J. Bailey Magruder 250 South Park Avenue, Suite 600 Winter Park, Florida 32789

Vice President/Secretary -Thomas R. Whatley, Jr. 250 South Park Avenue, Suite 600 Winter Park, Florida 32789

Vice President/Treasurer - Connie G. Fraley 250 South Park Avenue, Suite 600 Winter Park, Florida 32789 Thomas R. Whatley, Jr.

13. Carri G. Franz

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Vice President - Connie G. Fraley

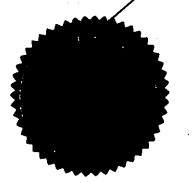
(Typed or Printed Name and Capacity of Person Signing Application)

SECRETARY OF STATIONS
DIVISION OF CORPORATIONS

95 SEP -6 PM 4: 50

# TATE OF $\angle$

I. Jim Bennett, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that the domestic corporation records on file in this office disclose that American Ophthalmic of Alabama, Inc. incorporated in Montgomery County, Montgomery, Alabama on June 28, 1993. further certify that the records do not disclose that said American Ophthalmic of Alabama, Inc. has been dissolved .\_\_



In Testimony Whereof, I have hereunto set my hand and affixed the Great Scal of the State, at the Capitol, in the City of Montgomery, on this day.

August 29, 1995

Date

in Bernett

Jim Bennett

Secretary of State

CAPITOL CORPORATE SERVICES, INC.

# F95000005194

December 26, 1996

FLORIDA SECRETARY OF STATE P. O. Box 6327 Tallahassee, FL 32314

Attn: Corporate Filing Dept.

Re: AMERICAN OPHTHALMIC OF ALABAMA, INC.

500002044015--7 -01/03/97--01026--005 \*\*\*\*\*35.00

Dear Filing Clerk:

Enclosed please find a Statement of Change of Registered Office/Agent, for the above referenced name, which is to be filed in your office. I have enclosed check # 6989 in the amount of \$ 35.00 for the filing fee. After filing please return to me the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please contact me at 800-472-0544.

Thank you,

Ollanie Lundgun

Delanie Lundgren

enclosures

INN -2 AM II: 2 RETARY OF STAT AHASSEE, FLORI

nx dr

### Florida Department of State, Jim Smith, Secretary of State

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

| Document number  e name and address of the current registered agent and office:  Dration Service Company  Rays Street, Tallahassee, Fl 32301-2525  e name and address of the new registered agent and office:  (P.O. Box Not Acceptable)  Services, Inc.  Park Avenue, Tallahassee, Florida 32301  Greet address of its registered agent and the street address of the business office registered agent as changed will be identical.  Change was authorized by resolution duly adopted by its board of directors or be identical authorized by the board.  Signature  Signature  Typed or printed name and title                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1a. The name of the corporation is:  AMERICAN OPTERIMIC OF ALABAMA, INC.  795000005194                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                           |                                                                                     |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------------------------|--|
| Tays Street, Tallabassee, F1 32301-2525  In name and address of the new registered agent and office:  (P.O. Box Not Acceptable)  Services, Inc.  Repart Avenue, Tallabassee, Florida 32301  Treet address of its registered agent and the street address of the business office registered agent as changed will be identical.  Change was authorized by resolution duly adopted by its board of directors or business officer so authorized by the board.  Signature  Signature  Typed or printed name and title  The PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLY of the Proper and Composition of  | b. Date of incorporation:09/06/95                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <del></del>                                               | nber                                                                                |  |
| Rays Street, Tallabassee, F1 32301-2525  In name and address of the new registered agent and office:  (P.O. Box Not Acceptable)  Services, Inc.  Repark Avenue, Tallabassee, Florida 32301  Reset address of its registered agent and the street address of the business office registered agent as changed will be identical.  Change was authorized by resolution duly adopted by its board of directors or being authorized by the board.  Change was authorized by resolution duly adopted by its board of directors or being authorized by the board.  Reichard J. D'Amico, Vice Presider  Typed or printed name and title                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | The name and address of the current registered agent and office:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                           |                                                                                     |  |
| e name and address of the new registered agent and office:  (P.O. Box Not Acceptable)  Services, Inc.  R Park Avenue, Tallabases, Florida 32301  Reset address of its registered agent and the street address of the business office registered agent as changed will be identical.  Change was authorized by resolution duly adopted by its board of directors or business officer so authorized by the board.  SIGNATURE  SIGNATURE  Typed or printed name and title  Typed or printed name and title  Typed or printed name and title  THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND ACCEPT THE APPOINTMENT AS REGISTERED AT THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND ACCEPT THE PROPER AND ACCE | 1201 Mays Street, Tallahassee, Fl 3230                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1-2525                                                    |                                                                                     |  |
| Services, Inc.  Repark Avenue, Tallabasee, Florida 32301  Rest address of its registered agent and the street address of the business officeregistered agent as changed will be identical.  Change was authorized by resolution duly adopted by its board of directors or business officers as authorized by the board.  Richard J. D'Amico, Vice Presider  Richard J. D'Amico, Vice Presider  Typed or printed name and title  RESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLY THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLY THE P | The name and address of the new register                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ed agent and office:                                      | -2<br>ASS                                                                           |  |
| reet address of its registered agent and the street address of the business officeregistered agent as changed will be identical.  Change was authorized by resolution duly adopted by its board of directors or business of authorized by the board.  Land Admin President Properties Typed or printed name and title  Typed or printed name and title  Typed or printed name and title  AND AGENT AND TO ACCEPT SERVICE OF CESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED CESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED CESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY IT THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLY THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLY THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLY THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLY THE PROPER AND COMPLY THE PROPERTIES. AND I AM FAMILIAR WITH AND ACCEPT OBLIGATION OF MY POSITION AS REGISTERED AGENT.  REAL SERVICES. IGC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | NRAI Services, Inc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                           | FES                                                                                 |  |
| reet address of its registered agent and the street address of the business officeregistered agent as changed will be identical.  Change was authorized by resolution duly adopted by its board of directors or business of authorized by the board.  Land Admin President Properties Typed or printed name and title  Typed or printed name and title  Typed or printed name and title  AND AGENT AND TO ACCEPT SERVICE OF CESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED CESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED CESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY IT THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLY THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLY THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLY THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLY THE PROPER AND COMPLY THE PROPERTIES. AND I AM FAMILIAR WITH AND ACCEPT OBLIGATION OF MY POSITION AS REGISTERED AGENT.  REAL SERVICES. IGC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 26 East Park Avenue, Tallahassee, Florida 32301                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                           | - 65 <b></b>                                                                        |  |
| SIGNATURE  Typed or printed name and true  Ember 17, 1996  DATE  OBTE  OBTE  OBTE  Typed or printed name and true  Typed or pr | fits registered agent as changed will be iden                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | iticer.                                                   |                                                                                     |  |
| SIGNATURE  Typed or printed name and true  Ember 17, 1996  DATE  OBTE  OBTE  OBTE  Typed or printed name and true  Typed or pr | its registered agent as changed war be keen<br>uch change was authorized by resolution du                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ily adopted by its board                                  | of directors or by                                                                  |  |
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| CESS FOR THE ABOVE STATED CORPORATION AND REGISTERED HIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY IT THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLY IT THE PROVISIONS OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT IT PROFILED AGENT.  OBLIGATION OF MY POSITION AS REGISTERED AGENT.  NRAI SERVICES, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | uch change was authorized by resolution due officer so authorized by the board.    Signature   Signature     December 17, 1996                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | uly adopted by its board                                  | of directors or by                                                                  |  |
| The Action of the Control of the Con | uch change was authorized by resolution due officer so authorized by the board.  **Electric State Stat | Exichard J. D'Amico Typed or printed na                   | of directors or by  , Vice President  me and title                                  |  |
| SIGNATURE By: Olanu Bunda (Registered Agent)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | such change was authorized by resolution due no officer so authorized by the board.    Signature     December 17, 1996     DATE     DATE   | ENT AND TO ACCEPT ORATION AT THE PLACE THE APPOINTMENT AS | yice Presi<br>me and title<br>SERVICE OF<br>CE DESIGNAT<br>REGISTERED<br>REE TO COM |  |

CR2E045 (7-91)

FILING FEE: \$35.00