

HC

HealthCare COMPARE
Administrative Services, Inc.

F96000001746

July 16, 1997

Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
97 JUL 21 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: Statement of Change of Registered Agent
HealthCare COMPARE Administrative Services Inc.

To Whom This May Concern:

Enclosed please find the Statement of Change of Registered Agent form for HealthCare COMPARE Administrative Services, Inc. as well as a check in payment of the \$35 fee.

If you need additional information, please contact me directly at (630) 241-7919, extension 2142.

Sincerely,

Paula Denton

Paula Denton
Regulatory Paralegal

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DFG 7/22

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 Illinois 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: HealthCare COMPARE Administrative Services, Inc.
2. The mailing address of the corporation is: 3200 Highland Avenue, Downers Grove, IL 60515
3. Date of incorporation/qualification: 04/04/96 Document number: _____
4. The name and address of the current registered agent and office:

The Department of Insurance, 200 East Gaines Street,
P.O. Box 6200
Tallahassee, Florida 32314-6200

5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

C T Corporation System
1200 Pine Island Road
Plantation, Florida 33324

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.

X Joseph E. Whitters 7/1/97
(Signature of an officer, chairman or vice chairman of the board) (Date)

Joseph E. Whitters, Treasurer
(Printed or typed name and title)

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.

James M. Halpin
(Signature of Registered Agent)

7/14/97
(Date)

If signing on behalf of an entity:

James M. Halpin
(Typed or Printed Name)

Assistant Secretary
(Capacity)

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