Section 215.26, Florida Statutes, states in part; "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or

Section _____*, Florida Statutes, I hereby apply for a refund of moneys I ps subject to refund. The following information is submitted to substantiate the claim. *, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are C T Corporation System Name: EIN or SS#: 660 East Jefferson Street Address: Tallahassee, FL 32301 Amount: \$35.00 Date Paid Reason for claim: Document will not be filed. ASI TAMPA CORP. (F97000002090) Certified true and correct this 11th day of September , 19 97. Signature Come Buy * Must be completed if authority is other than Section 215.26, Florida Statutes. J.M. French - Amendments For Agency Use Only

1gency recommends approval of above claim and submits the following information to substantiale the claim: - Amount of recommended refund \$.35.00 bit to the The amount covered above various deposited moving State Treath a superior superior deposited in State Trasurer's Recalif No. 01097-018 dated - 07/30/27 45202130001253000000000000000 Statulory Authority for Collection #607.01228 It is requested that payment be made from the following account. NAME OF ACCOUNT 4 5 2 0 2 1 3 0 0 0 1 3 5 3 0 0 0 0 0 0 2 2 0 0 2 0 0 0



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 1, 1997

C T CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: ASI TAMPA CORP. Ref. Number: F97000002090

Refund app. Sent 9/11/97

We have received your document for ASI TAMPA CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate submitted does not reflect a change of jurisdiction from California to Delaware. If the California entity changed its jurisdiction to Delaware, we will need certification from Delaware reflecting this change. If the California corporation merged into a Delaware corporation, and the Delaware corporation survived the merger, then the Delaware corporation must file qualification documents if they wish transact business in Florida; the California corporation would file an application for withdrawal from Florida.

To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the CORPORATE SPECIALIST indicated.

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) 487-6957.

Joy Moon-French Corporate Specialist

Letter Number: 897A00039198

Document Number Only 00209 CT CORPORATION SYSTEM Requestor's Name 660 East Jefferson Street Address 32301 Tallahassee, FL 222-1092 300002253183--**1** -07/30/97--01097--018 Zip Phone State City *****35.00 *****35.00 **CORPORATION(S) NAME** -lovida () Profit () Amendment () Merger () NonProfit () Limited Liability Co. () Mark () Dissolution/Withdrawal () Foreign () Other UCC Filing () Annual Report () Limited Partnership () Change of R.A. () Reservation () Reinstatement ()Fic. Name () CUS () Photo Copies () Certified Copy () After 4:30 () Call if Problem () Call When Ready Pick Up Walk In () Mail Out Name PLEASE RETURN EXTRA COPIES Availability FILE STAMPED Document Examiner Updater 7 - 30 Verifier Acknowledgment W.P. Verifler

CR2E031 (1-89)