ACCOUNT NO. : 072100000032

REFERENCE: 002489 7124523

AUTHORIZATION :

ORDER DATE: October 20, 1998

ORDER TIME : 3:19 PM

800002668608--1

ORDER NO. : ...002489-015

CUSTOMER NO: 7124523

CUSTOMER: Mr. Paul Turner

Access America Financial Corp.

Suite 300

1525 N.w. 167th Street

Miami, FL 33169

CHANGE OF AGENT

NAME: MIDSTATE CARDSERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Janna Wilson



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 21, 1998

CSC JANNA WILSON TALLAHASSEE, FL

SUBJECT: MIDSTATE CARDSERVICES, INC.

Ref. Number: F98000003800

We have received your document for MIDSTATE CARDSERVICES, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

Our records show the date of qualification is July 2, 1998, please correct yyour document accordingly.

The document must contain the name and capacity of the person signing on behalf of the new registered agent.

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) 487-6908.

Teresa Brown Corporate Specialist

> **O**⊕ **C**\J

Letter Number: 998A00051924





FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 29, 1998

CSC JANNA WILSON TALLAHASSEE, FL

SUBJECT: MIDSTATE CARDSERVICES, INC.

Ref. Number: F98000003800

We have received your document for MIDSTATE CARDSERVICES, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

You failed to make the correction(s) requested in our previous letter.

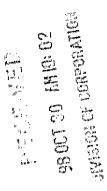
Our records show the date of qualification is July 2, 1998, please correct your document accordingly.

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) 487-6908.

Teresa Brown Corporate Specialist

Letter Number: 998A00053040





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

	rporation organized under t	•		lorida Statutes, the
	lowing statement in order to	change its registere	ed office or registered as	gent, or both, in the
State of Florida			_	
i. The name of	the corporation is: Mids	state Cardser	vices, Inc.	
				14 -
2. The mailing	address of the corporation is	: 6100 Holly	wood Blvd., 6th	Floor
Hollyv	wood, FL 33024 "			
3. Date of incom	rporation/qualification:0'	7/02/98	Document number: F9	8000003800
4. The name and	d address of the current regis	stered agent and offi	ice:	
	Bennett, Josh Es	sa		4.0 %
•	100 SE Second St		2600	PEC S
•	Miami, FL 33131	**************************************		DCT 20 PM able) E. F.
5. The name and	d address of the new register	****		able)
	Corporations Ser	vice Company	•	720 4
-	Corporate Filing	Denartment		黑二
	1201 Hays Street	* * * * * * * * * * * * * * * * * * * *		
-	Tallahassee, FL	32301	***	4. <u> </u>
The street addreagent, as change	ess of its registered office a ed, will be identical.	and the street addre	ss of the business offic	e of its registered
Such change wa authorized by the	as authorized by resolution he board	duly adopted by it	s board of directors or	by an officer so
			· 16	15-90
(Signature	of an officer, chairman or vice cha	irman of the board)	(Dat	1.5. 7.0 e)
Paul D. Tu	rner, Secretary			
	(Printed or typed name and ti	itle)		•
Having been na corporation, I h I fürther agree i performance of registered agen	med as registered agent an nereby accept the appointm to comply with the provisio my duties, and I am familio t.	nd to accept service ent as registered ay ns of all statutes re ar with and accept	of process for the abo gent and agree to act in lative to the proper an the obligation of my po	ve stated 1 this capacity. d complete osition as
Low	1a P. Duns		10-20-	72
(S	ignature of Registered Agent		(Date)	, <u>, </u>
If signing on behal	f of an entity:			
Laura R.			As its Agent	
(T)	Typed or Printed Name)		(Capacity)	

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