



**CAPITOL CORPORATE SERVICES, INC.**

P 21411

October 25, 2000

FILED  
00 OCT 30 PM 12:14  
TALLAHASSEE FLORIDA  
OFFICE OF STATE

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

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-10/30/00--01156--013  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Attn: Corporate Filing Dept.

Re: **EYE CARE CENTERS OF AMERICA, INC.**

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 # 6405 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,

*D Case*

Delanie Case

enclosures

*ROA Charge  
11-7-00  
PMS*

**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 Texas  
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: EYE CARE CENTERS OF AMERICA, INC.

2. The mailing address of the corporation is: 11103 West Avenue, San Antonio, Texas  
78213

3. Date of incorporation/qualification: October 24, 1988 Document number: P21411

4. The name and address of the current registered agent and office:

NRAI Services, Inc.

526 East Park Avenue

Tallahassee, FL 32301

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

Capitol Corporate Services, Inc.

1333 North Duval Street

Tallahassee, FL 32303

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.

*Doug Shepard*  
(Signature of an officer, chairman or vice chairman of the board)

10 October 00  
(Date)

Doug Shepard VP/Controller  
(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.*

Capitol Corporate Services, Inc.

*Delanie Case*  
(Signature of Registered Agent)

10.24.00  
(Date)

If signing on behalf of an entity:

Delanie Case

(Typed or Printed Name)

Assistant Secretary

(Capacity)

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