

P98000053684

BAKER
&
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COUNSELLORS AT LAW

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FAX (407) 841-0168
WRITER'S DIRECT DIAL NUMBER (407) 649-4681

March 23, 1999

Susan Payne
Senior Section Administrator
Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

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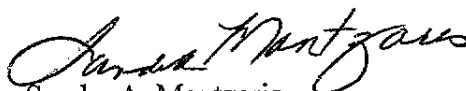
Re: Eye On Claims, Inc.
Ref. Number: P98000053684

Dear Ms. Payne:

Pursuant to your letter dated March 2, 1999, we have enclosed our check in the amount of \$35.00 representing your fee for the change of registered agent for the above-referenced entity. We have also enclosed the executed Statement of Change of Registered Office or Registered Agent or both, along with a copy of your letter requesting same.

Should you require anything further, please contact the undersigned.

Very truly yours,


Sandra A. Mantzaris
Legal Assistant, Corporate Maintenance

FILED
99 MAR 29 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enclosures
cc: Barbara A. Egolf, Esq. (w/o encs.)

RAIRO
change
3/29/99



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 2, 1999

Sandra A. Mantzaris, Legal Assistant
Baker & Hostetler LLP
P.O. Box 112
Orlando, FL 32802-0112

SUBJECT: EYE ON CLAIMS, INC.
Ref. Number: P98000053684

We have received your document for EYE ON CLAIMS, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to file your document is \$35.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6901.

Susan Payne
Senior Section Administrator

Letter Number: 699A00009322

3/15/99 - R/A - Anthony J. Scarcella

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STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO THE SECRETARY OF STATE OF THE STATE OF FLORIDA:

Pursuant to the provisions of Sections 607.0501 and 607.0502, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

FIRST: The name of the corporation is **Eye On Claims, Inc..**

SECOND: The address of its present registered office is: 3544 Golf View Boulevard, Orlando, Florida 32804.

THIRD: The address to which its registered office is to be changed is: 200 South Orange Avenue, Suite 2300, Orlando, Florida 32801.

FOURTH: The name of its present registered agent is: Anthony J. Scarcella

FIFTH: The name of its successor registered agent is: A.G.C. Co.

SIXTH: The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

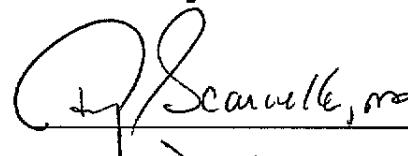
SEVENTH: Such change was authorized by resolution duly adopted by its Board of Directors.

DATED this 18 day of February, 1999.

EYE ON CLAIMS, INC.,
a Florida corporation

By:

As its:


Director

The undersigned accepts the appointment of registered agent and is familiar with and accepts the obligations of Section 607.0505, Florida Statutes.

DATED this 23 day of Feb, 1999.

A.G.C., Co.

By: 

Vice President