

P990000010504

Ken Murrah
508 Lemaster Drive
Ponte Vedra Beach, FL 32082

August 24, 1999

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

700002970917--0
-08/26/99-01052-007
*****35.00 *****35.00

Attn: Corporate Records Bureau

Re: Franavision, Inc./Change of Registered Agent

Dear Sir or Madam:

I enclose a statement for the change of the registred office and registered agent. I enclose a check for \$35.00 for your filing fee.

Very truly yours,


KEN MURRAH

FILED
99 AUG 25 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Chg.

V. SHEPARD SEP 2 1999

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

Pursuant to the provisions of section 607.0502 or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, 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: Franavision Inc.

1a. Date of incorporation: 2/3/1999

Document number: P99000010

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

Business Filings Incorporated
1186 Ocean Shore Boulevard, Ste 195
Ormond Beach, FL 32176


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

Ken Murrah
508 Lemaster Drive
Ponte Vedra Beach, FL 32082

The street address of its registered agent 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.

SIGNATURE


Ken Murrah, President

DATE: August 24, 1999

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

SIGNATURE


Ken Murrah, Registered Agent

8/24/99

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA