

F94000006067

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

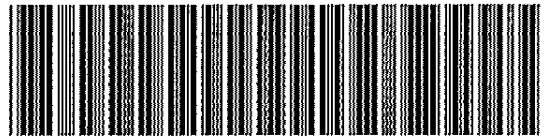
(Business Entity Name)

(Document Number)

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TALAHASSEE, FLORIDA

OR  
4/12/05



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032  
REFERENCE : 304249 7422804  
AUTHORIZATION : *Patricia Pizutto*  
COST LIMIT : \$ 35.00

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ORDER DATE : April 8, 2005

ORDER TIME : 10:01 AM

ORDER NO. : 304249-315

CUSTOMER NO: 7422804

CUSTOMER: Sunny L. Craig  
U.s. Nursing Corporation  
Suite 200  
6501 S. Fiddler's Green Circle  
Greenwood Villa, CO 80111  
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CHANGE OF AGENT

NAME: U.S. NURSING CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman

**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, this statement of change is submitted for a corporation organized under the laws of the State of Colorado in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: U. S. NURSING CORPORATION
2. The principal office address: Suite 200, 6501 S. Fiddler's Green Circle  
Greenwood Villa, CO 80111
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: November 28, 1994 Document number: F94000006067
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T Corporation System

1200 South Pine Island Road

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

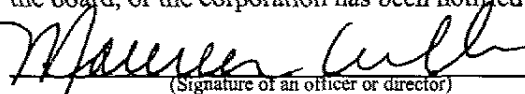
1201 Hays Street

(P.O. Box or personal mailbox NOT acceptable)

Tallahassee, FL 32301

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, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

Maureen Cullen, Attorney in Fact  
(Printed or typed name and title)

*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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Corporation Service Company

  
(Signature of Registered Agent)

April 05, 2005

(Date)

If signing on behalf of an entity:

Jacqueline M. Giles

(Typed or Printed Name)

Assistant Vice President

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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