## Florida Department of State

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## REGISTERED AGENT CHANGE FROG ONCURE SOUTHSIDE, L.L.C.

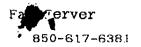
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S. HAWKES

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January 5, 2010

## FLORIDA DEPARTMENT OF STATE

Division of Corporations

FROG ONCURE SOUTHSIDE, L.L.C. 188 INVERNESS DRIVE WEST SUITE 650 ENGLEWOOD, CO 80112

SUBJECT: FROG ONCURE SOUTHSIDE, L.L.C.

REF: L03000003082

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Suzanne Hawkes Regulatory Specialist II Registration/Qualification Section

FAX Aud. #: H10000000845 Letter Number: 410A00000130



## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent. or both, in the State of Florida.

1. Name of the limited liability company: FROO ONCURE SOUTHSIDE, L.L.C.

<ol> <li>(a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)</li> </ol>	ny: 3599 University Blvd, South Jacksonville, FL 32216
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	188 Javerness Drive West, Suite 650
1/27/03	1.03000003082
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:
Registered Agent:	Smith Hulsoy & Busey
Registered Office Address:	225 Water Street, Suite 1800 Jacksonville, FL 32202
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address: <u>(MUST BE FLORIDA STREET ADDRESS)</u>	Corporation Service Company  1201 Hays Street  Tallahassee ,FL 32301
If the limited liability company is not organized under the that after the change or changes are made, the Florida stroffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.  (Signature of a member or authorized representative of a member)  Maureen Cullen, Attorney In Fact (Printed or typed name of signee)	e laws of the State of Florida, it is hereby confirmed rect address of the registered office and the business case of a Florida limited liability company, it is it by an affirmative vote of the members of the limited sof organization or the operating agreement of the
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the sam familiar with and accept the obligations of my positive F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notification. Service Company  By:  (Signature of Registered Afrit) Sylvia Queppet, Assistant Vice Presidents	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00