

N14110

Donor's Name _____
 From This portion can be removed for Recipient's records.
 Date 4-17-00 FedEx Tracking Number 819702815853
 Sender's Name V. LORUMBE Phone 561 659-5990
 Company AKERMAN SENTERFITT & EIDSON PA
 Address 777 S FLAGLER DR STE 900
 City WEST PALM BEACH State FL ZIP 33401

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
 (Corporation Name) (Document #)
2. _____
 (Corporation Name) (Document #)
3. _____
 (Corporation Name) (Document #)
4. _____
 (Corporation Name) (Document #)

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 *****770.00 *****35.00

- Walk in Pick up time Certified Copy
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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

NEW FILINGS

- Profit
 Not for Profit
 Limited Liability
 Domestication
 Other

AMENDMENTS

- Amendment
 Resignation of R.A., Officer/Director
 Change of Registered Agent
 Dissolution/Withdrawal
 Merger

OTHER FILINGS

- Annual Report
 Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
 Limited Partnership
 Reinstatement
 Trademark
 Other

*Ro change
 4/27/00
 Spayne*

Examiner's Initials

**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 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: St. Mary's Pain Center, Inc.
2. The mailing address of the corporation is: 1309 No. Flagler Drive, West Palm Beach, FL 33401-3406, US
3. Date of incorporation/qualification: 03/31/1986 Document number: N14110
4. The name and address of the current registered agent and office:

Valerie Goodwin Larcombe
1309 No. Flagler Drive
West Palm Beach, FL 33401

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

Valerie G. Larcombe, Esq.
Akerman Senterfitt
Phillips Point - East Tower
777 South Flagler Drive, Suite 900
West Palm Beach, FL 33401-6125

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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.



Steven Nathan, President and CEO

4/11/00

(Date)

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.



(Signature of Registered Agent)

4/14/2000

(Date)

If signing on behalf of an entity: Valerie G. Larcombe, Secretary

FILING FEE: \$35.00

Division of Corporation

P.O. Box 6327

Tallahassee, FL 32314