

P98000084852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

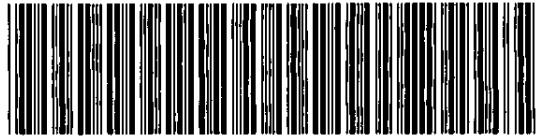
(Business Entity Name)

(Document Number)

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PA
Change
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 577445 4337669

AUTHORIZATION :

Susie Knight

COST LIMIT : \$ 35.00

ORDER DATE : March 20, 2013

ORDER TIME : 12:33 PM

ORDER NO. : 577445-010

CUSTOMER NO: 4337669

CHANGE OF AGENT

NAME: FLORIDA HEALTH PARTNERS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER: _____

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FLORIDA HEALTH PARTNERS, INC.
2. The principal office address: 8906 Brittany Way, Tampa, FL 33619
3. The mailing address (if different): 240 Corporate Blvd., Norfolk, VA 23502
4. Date of incorporation/qualification: 10/02/1998 Document number: P98000084852
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Russell Morgan, VP/Dir
8906 Brittany Way
Tampa, FL 33619

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

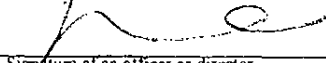
Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

P.O. Box NOT acceptable

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


Signature of an officer or director

ROBERT C. FLOWE, VICE PRESIDENT
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.

By: 
Signature of Registered Agent

4/4/2013
Date

If signing on behalf of an entity:
Elizabeth A. Dawson, Asst. Vice President
Typed or Printed Name

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