

P99000099042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

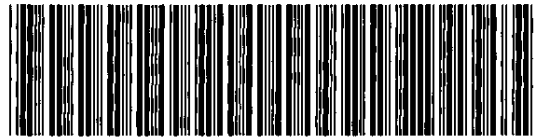
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000097666270

RA
Change

FILED
2007 APR 30 PM 4: 18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2007 APR 30 PM 4: 22
TO BE FILED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

DR
4/30/07



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 852136 7452534
AUTHORIZATION : *Susie Knight*
COST LIMIT : \$ 35.00

ORDER DATE : April 16, 2007
ORDER TIME : 2:44 PM
ORDER NO. : 852136-270
CUSTOMER NO: 7452534

CHANGE OF AGENT

NAME: TEXARKANA MEDICAL EQUITY
INVESTORS CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight -- EXT# 2956

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: TEXARKANA MEDICAL EQUITY INVESTORS CORPORATION

2. The principal office address: 420 South Orange Avenue, Suite 500, Orlando, FL 32801

3. The mailing address (if different):

4. Date of incorporation/qualification: November 10, 1999 Document number: P9900009904

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Amy J. Patterson
420 South Orange Avenue, Suite 500
Orlando, FL 32801

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 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)

Brian J. Maas, Sr. V.P.
(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

By: (Signature of Registered Agent)

4-26-07
(Date)

If signing on behalf of an entity:

Sylvia Queppet
(Typed or Printed Name)

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

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

FILED
2007 APR 30 PM 4:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA