P99000110914

CT CORPORATION SYSTEM

FILED
01 DEC 31 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION(S) NAME

(1) MDNX Acquistion Corp.

~~(2) Medical Manager Research & Development, Inc.~~

RA Change

400004744844--0
-12/31/01--01018--018
*****35.00 *****35.00

() Profit () Nonprofit	() Amendment	() Merger
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark
() Limited Partnership () LLC	() Annual Report () Name Registration () Fictitious Name	() Other (x) Change of RA () UCC
() Certified Copy	() Photocopies	() CUS
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up

Name 12/31/01 Order#: 5016166

Availability 12/31/01

Document

Examiner Ref#: ________

Updater

Verifier ________ kf

W.P. Verifier ______ Amount: $ ________

01 DEC 31 AM 11:41
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

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 : MDNX Acquisition Corp.

2. The mailing address of the corporation : 669 River Drive Center 2, Elmwood Park, NJ 07407

3. Date of incorporation/qualification: 12/27/99 Document number: P99000110914

4. The name and address of the current registered agent and office:

American Information Services, Inc.
One SE Third Ave., 28th Floor
Miami, FL 33131

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

C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road,
Plantation, Florida 33324

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TALLAHASSEE, FLORIDA

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.

Frank J Failla Jr 11/27/01
(Signature of an officer, chairman or vice chairman of the board) (Date)

Frank J Failla, Jr Vice Pres
(Printed or typed name and title)

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.

C T Corporation System
By: Denise Maestre 12/27/01
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

Denise Maestre Vice President
(Typed or Printed Name) (Capacity)

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

CR2E045(9/00)

DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314

FL006 - 09/17/01 C T System Online