28103 Sternstein Rainer + Clarke Requestor's Name Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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1. (Corp	oration Name)	(Document #)		81097 018 *****35.00
2. <u>(Corp</u>	poration Name)	(Document #)		
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NEW FILINGS:	AMENDMEN	TS	, P	
Profit	Amendment			
NonProfit	Resignation of R.A	., Officer/Director		
Limited Liability	Change of Register	red Agent	_	
Domestication	Dissolution/Withd	rawal		
Other	Merger			70 0
OTHER FILINGS Annual Report	REGISTRA QUALIFIC	ATION	25 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	ALCENES WELLS
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	Reinstatement		700	
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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE FOR CORPORATIONS

Pursuant to the provisions of section 607.0502(3), 617.0502(3), 607.1508(2), or 617.1508(2), Florida Statutes, the undersigned registered agent of a corporation organized under the laws of the State of submits the following statement in order to change the registered office in Florida.

1. The name of the corporatio	n: CLINICAS PASTEUR, INC.		97 O	
2. The street address of the cu	CT 23 ETARY			
	GERALD B. STERNSTEIN, ESQ.		THE R	
	215 South Monroe Street, Suite	815	of STATE E. FLORIDA	
	Tallahassee, Florida 32301		Ä	
3. The street address of the ne				
	GERALD B. STERNSTEIN, ESQ.			
	314 North Calhoun Street		٠	
	Tallahassee, Florida 32301			

The corporation has been notified in writing of this change.

The street address of the registered office and the street address of the business office of the registered agent, as changed, will be identical.

Date: /0-23-97

(Signature of Registered Agent)

Gerald B. Sternstein
(Printed or Typed Name)

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INHS28(6/95)

FEE: \$35.00