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(((H120003006673)))



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Division of Corporations

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## REGISTERED AGENT CHANGE CASTELLANOS, EVANS & BORDEN, M.D., P.A.

| Certificate of Status | 0       |
|-----------------------|---------|
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12/26/2012

## FAX AUDIT No. H12000300667 3

## 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: CASTELLANOS, EVANS & BORDEN, M.D., P.A.  | -                |
| 2. The principal office address: 12631 WHITEHALL DRIVE, FORT MYERS, FLORIDA 33907  | -                |
| 3. The mailing address (if different): 507 DEL PRADO BOULEVARD S, CAFE CORAL, FLORIDA 33990  | -                |
| 4. Date of incorporation/qualification: DECEMBER 2, 1978 Document number: 597082   | -                |
| 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)   |                  |
| RONALD D. CASTELLANOS, MD (RESIGNED)   | ro <sub>la</sub> |
| 4855 DOCKSIDE DRIVE, APT 202   | a tree           |
| FORT MYERS, FL 33919   | i<br>I           |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  | 7                |
| WILLIAM P. EVANS, MD   |                  |
| 12631 WHITEHALL DRIVE  |                  |
| P.O. Box NOT acceptable FORT MYERS, FLORIDA 33907  |                  |
| 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.  |                  |
| WILLIAM P. EVANS, MD., BIRECTOR Signature of an office for director  Finated 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 amfamiliar with and accept the obligation of my position as registered agent. Or, if this document is beingfiled merely to reflect a change in the registered affice address, I hereby confirm that the corporation has been notified in writing of this change. |                  |
| Sugnature of Registered Agent  |                  |
| If signing on behalf of an entity:   |                  |
|  |                  |
| Typed or Printed Name  * * * ETI INC EDD. \$25.00 * * *  |                  |

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