



MAX C. KARRER, M.D. MICHELLE A. McLANAHAN, M.D.
WILLIAM R. WOODEN, M.D. JOAN M. MACKSEY, M.D.
ANGELA S. MARTIN, M.D. GRACE M. VALENTE, M.D.
LAURIE Q. SEIGH, MSN, A.R.N.P.

600861

September 30, 1998

600002683206--7
-11/09/98-01071-012
*****35.00 *****35.00

To Whom It May Concern:

Please be advised that as of November 2, 1998, we will be relocating our offices. Please change your records to reflect our new billing address:

Women's Medical Group, P.A.
Joe Adams Building
4205 Belfort Road, Suite 2004
Jacksonville, FL. 32216
(904) 296-3200

Please feel free to call me at 731-7800 ext. 829 prior to November 2, 1998 should you have any questions.

Sincerely,

Debbie Willis
Business Administrator

600861
98 NOV 10 AM 9:27
FILED
SECRETARY OF STATE
JACKSONVILLE, FLORIDA

600861
2080AC
11-9-98

☐ 3550 UNIVERSITY BLVD. SOUTH, SUITE 301
JACKSONVILLE, FLORIDA 32216
(904) 731-7800
FAX (904) 731-7608

☐ BOOKKEEPING & INSURANCE
(904) 731-5848

☐ 14444 BEACH BLVD., SUITE 311
JACKSONVILLE BEACH, FLORIDA 32250
(904) 223-1122
FAX (904) 223-7722

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

1a. The name of the corporation is: Women's Medical Group, P.A.

1b. The mailing address of the corporation is: old 3550 University Blvd. South
Ste 301 Jax, FL 32216

1c. Date of incorporation: _____ Document number: _____

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

Women's Medical Group, P.A.
3550 University Blvd. So, Ste 301
Jax, FL 32216

3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

Angela Martin
4205 Belfort Road, Ste 2004
Jax, FL 32216

FILED
98 NOV 9 AM 9:27
SECRETARY OF STATE
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.

Angela Martin
(Signature of an officer, chairman or
vice chairman of the board)

11/5/98
(Date)

Angela S. Martin
(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.

Angela Martin
(Signature of Registered Agent)

11/5/98
(Date)

If signing on behalf of an entity:

Angela S. Martin
(Typed or Printed Name)

President
(Capacity)