

829863



ACCOUNT NO. : 072100000032

REFERENCE : 627218 4391033

AUTHORIZATION :

Patricia P. [Signature]

COST LIMIT : \$ 35.00

ORDER DATE : December 9, 1997

ORDER TIME : 9:10 AM

ORDER NO. : 627218-035

CUSTOMER NO: 4391033

100002385601--5

CUSTOMER: Mr. David Mason
Cardinal Health, Inc.
5555 Glendon Court

Dublin, OH 43016

CHANGE OF AGENT

NAME: OWEN HEALTHCARE, INC.

FILED
97 DEC 30 PM 12:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Jon A Bowling

12/30

*Jon
R.A.
Change*

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TALLAHASSEE FLORIDA

Florida Department of State, Sandra B. Mortham, Secretary of State

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

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 Texas 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 is: Owen Healthcare, Inc.
2. The mailing address of the corporation is: 9800 Centre Parkway, Suite 1100
Houston, TX 77036
3. Date of incorporation/qualification: 4/6/73 Document number: _____
4. The name and address of the current registered agent and office:

C T Corporation Systems

8751 W. Brower Rd Blvd.

Plantation, FL 33324

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

Corporation Service Company

1201 Hays Street

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.

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

12.18.97
(Date)

George H. Bennett, Jr., Asst. Secretary

Dec. 18 1997

(Printed or typed name and title)

(Date)

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.

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

Lisa G. Mulligan

Asst. VP

(Typed or Printed Name)

(Capacity)

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