

839906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100053850411

05/16/05--01043--002 \*\*35.00

FILED

2005 JUN -6 PM 4:44

CLERK OF STATE  
TALLAHASSEE, FLORIDA

*R.A. change*

C. Coulllette JUN 07 2005

***SUPERIOR***  
***INFORMATION SERVICES, LLC***

---

**P.O. Box 8787  
Trenton, NJ 08618-1427  
800-848-0489  
Fax 609-883-7891  
[www.superiorinfo.com](http://www.superiorinfo.com)**

Date: May 11, 2005

To: Secretary of State, Florida

From: April Brady – Manager of Corporate Services

Re: Change of Registered Office and Agent

Enclosed please find the Notice of Change of (1) Designated Office, (2) Agent for Service of Process, or (3) Address of Agent along with our check # 273004339 in the amount of \$35.00 for the filing fees.

Please return a stamp filed copies to us in the envelopes provided.

Should you need any further information, please do not hesitate to contact me at (800) 848-0489, ext. 5444.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

May 23, 2005

SUPERIOR INFORMATION SERVICES LLC  
PO BOX 8787  
TRENTON, NJ 08618-1427

SUBJECT: FIRST HEALTH SERVICES CORPORATION  
Ref. Number: 839906

We have received your document for FIRST HEALTH SERVICES CORPORATION and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette  
Document Specialist

Letter Number: 705A00036936

RECEIVED  
05 JUN -6 AM 8:00  
DIVISION OF CORPORATIONS

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: First Health Services Corporation  
(Name of corporation)

DOCUMENT NUMBER: 839906

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

April Brady  
(Name of person)

Superior Information Services, LLC  
(Name of firm/company)

P.O. Box 8787  
(Address)

Trenton, NJ 08650-0787  
(City/state and zip code)

For further information concerning this matter, please call:

April Brady at ( 800 ) 848-0489 x5444  
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**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 Virginia in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: First Health Services Corporation
2. The principal office address: 4300 Cox Road, Glen Allen, VA 23060
3. The mailing address (if different): 3200 Highland Avenue, Attn: Legal Dept., Downers Grove, IL 60515
4. Date of incorporation/qualification: 12/11/1991 Document number: 839906
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System  
1200 South Pine Island Road  
Plantation, FL 33324

FILED  
2005 JUN -6 PM 4:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.

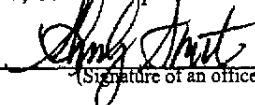
2731 Executive Park Drive, Suite 4

(P.O. Box or personal mailbox NOT acceptable)

Weston, FL 33331

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.



(Signature of an officer or director)

Shirley Smith, Asst. Secretary

(Printed 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 am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

NRAI Services, Inc.

by:

B. April Brady

(Signature of Registered Agent)

May 10, 2005

(Date)

If signing on behalf of an entity:

B. April Brady

(Typed or Printed Name)

Asst. Secretary

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314