## 47085

## Florida Department of State

Division of Corporations Public Access System

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REGISTERED AGENT CHANGE

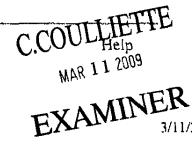
MEDI-DYN, INC.



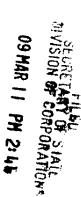
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3/11/2009



## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State oferror to change its registered affice or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: MEDI-DYN, INC.	
2. The principal	office address: 13111 EAST BRIARWOOD AVENUE, SUITE 225 OD, CO 80112	—
3. The mailing	address (if different):	
4. Date of incor	poration/qualification: 09/29/1980 Document number: 847085	<u> </u>
	d street address of the current registered agent and registered office on file with the riment of State: (If resigned, enter resigned)	
	NRAI SERVICES, INC.	
	2731 EXECUTIVE PARK DR, SUITE 4	
	WESTON FL 33331 US	-
<ol> <li>The name and (if changed):</li> </ol>	d street address of the new registered agent (if changed) and /or registered office  CT Corporation System  c/o CT Corporation System, 1200 South Pine Island Road	JIVISION OF CORPORATION
	C T Corporation System	4
	c/o C T Corporation System, 1200 South Pine Island Road	200
	(P.O. Box NOT scorpable)  Plantation, Florida 33324	OR.A
=	be identical.	
	as authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.	
)C (Signate	Rahad J. Rassitch Assh Leanthy The of all others or directors	
hereby accept further agree to fmy duties, an locument is bel corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance of i um familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	
By: Micho	CT Corporation System	
	mature of Registered Agent) (Date)	
- •	half of an entity: Seraphin Asst. Secretary	
	yped or Printed Name)	
	* * * FILING FER: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAMASSEE, FL 32314
CR2E045 (8/05)