



A 93000000796

ACCOUNT NO. : 072100000032

REFERENCE : 499575 4390339

AUTHORIZATION :

COST LIMIT : \$ 35

Patricia Pizut

ORDER DATE : August 18, 1997

ORDER TIME : 11:02 AM

ORDER NO. : 499575

CUSTOMER NO: 4390339

CUSTOMER: Ms. Fran Soldo
Medpartners, Inc.
3000 Riverchase
Galleria Tower / Ste. 1000
Birmingham, AL 35244

500002274885--4

CHANGE OF AGENT

NAME: PARAGON HEALTHCARE LIMITED
PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Susana Romagosa

97 AUG 22 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

97 AUG 22 PM 12:22
DIVISION OF CORPORATION

RACG
KRG
8/24

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership organized under the laws of the state of FLORIDA, submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. PARAGON HEALTHCARE LIMITED PARTNERSHIP
Name of the limited partnership
2. 8/3/93 3. A93000000796
Date of filing/registration in Florida Document number assigned

4. The name and address of the present registered agent and office:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND DRIVE
PLANTATION, FL. 33324

5. The name and street address of the successor registered agent and office: (P.O. Box not acceptable)

Corporation Service Company
1201 Hays Street, Suite 105
Tallahassee, Florida 32301

Such change was authorized by the general partners.
InPhyNet Hospital Services, Inc.

[Signature]
Signature of General Partner

By: Tracy P. Thrasher, VP and Sec'y

Having been named as registered agent and to accept service of process for the above stated limited partnership at the place designated in this certificate, 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.

Corporation Service Company

By: Debbie Skipper
Registered Agent signature
DEBBIE SKIPPER

August 13, 1997
Date

Filing Fee: \$35.00

Division of Corporations