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Florida Department of State
Division of Corporations
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Division of Corporations
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From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
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*Attn: Teresa
- corrected page -
keep date
thanks!
Jennifer*

REGISTERED AGENT CHANGE

MSPS ENTREPRENEURIAL II, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 607.0302, 617.0302, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MSPS Entrepreneurial II, Inc.
2. The principal office address: c/o CMS Affiliated Partnerships
111 Presidential Blvd., Ste 249, Bala Cynwyd, PA 19004
3. The mailing address (if different): c/o Donna Rittershausen, CMS Companies
1926 Arch Street, Philadelphia, PA 19103
4. Date of incorporation/qualification: 10/03/2000 Document number: 7000000005520
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Grant T. Dowling

222 West Comstock Ave., Suite 101

Winter Park, FL 32789

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

CT Corporation System

c/o CT Corporation System, 1200 South Pine Island Road

(P.O. Box NOT acceptable)

Plantation, Florida 33324

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.

By: Richard A. M. Kelly, V.P.

(Signature of an officer or director)

(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.

Margaret E. Routzahn

(Signature of Registered Agent)

1/5/06

(Date)

If signing on behalf of an entity:

MARGARET E. ROUTZAHN
Special Assistant Secretary

(Typed or Printed Name)

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

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

CR28045 (3/05)

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TALLAHASSEE, FLORIDA

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