2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 05, 2011
Secretary of State

DOCUMENT# F08000004794

Entity Name: AMERIGROUP COMMUNITY CARE OF NEW MEXICO, INC.

Current Principal Place of Business:

6565 AMERICAS PKWY, SUITE 110
ALBUQUERQUE, NM 87110

New Principal Place of Business:

Current Mailing Address:

6565 AMERICAS PKWY, SUITE 110
ALBUQUERQUE, NM 87110

New Mailing Address:

FEI Number: 20-2073598 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARC ST. PIERRE

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CP
Name: HOPKINS, LAURA A
Address: 4425 CORPORATION LANE
City-St-Zip: VIRGINIA BEACH, VA 23462

Title: DVP
Name: PACE, NICHOLAS J
Address: 4425 CORPORATION LANE
City-St-Zip: VIRGINIA BCH, VA 23462

Title: S
Name: BALDWIN, STANLEY F
Address: 4425 CORPORATION LANE
City-St-Zip: VIRGINIA BCH, VA 23462

Title: T
Name: ANGLIN, SCOTT W
Address: 4425 CORPORATION LANE
City-St-Zip: VIRGINIA BCH, VA 23462

Title: VP
Name: SHIELDS, KAREN L
Address: 4425 CORPORATION LANE
City-St-Zip: VIRGINIA BCH, VA 23462

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANNE MEYER POA 10/05/2011

Electronic Signature of Signing Officer or Director — Date