

F09000000461

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

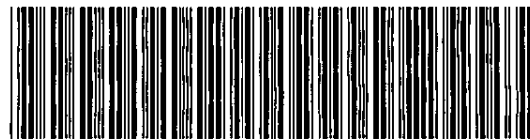
(Business Entity Name)

(Document Number)

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CRM
11-19-14



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 380855 7182683

AUTHORIZATION :

COST LIMIT \$ 35.00

Spivey

ORDER DATE : November 18, 2014

ORDER TIME : 3:25 PM

ORDER NO. : 380855-015

CUSTOMER NO: 7182683

CHANGE OF AGENT

NAME: PHYSASSIST SCRIBES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams

EXAMINER'S INITIALS: _____

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PhysAssist Scribes, Inc.
Name of Corporation

DOCUMENT NUMBER: F09000000461

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:

Kelly Greaney
Name of Contact Person

Firm/Company

265 Brookview Centre Way, Suite 400
Address

Knoxville, TN 37919
City/State and Zip Code

kelly_greaney@teamhealth.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE
FL

For further information concerning this matter, please call:

Kelly Greaney at (865) 693-1000
Name of Contact 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of the corporation: PhysAssist Scribes, Inc.
2. The principal office address: 6451 Brentwood Stair Road, Suite 100, Fort Worth, TX 76112
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/02/2009 Document number: F09000000461
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CT Corporation System
1200 South Pine Island Road
Plantation FL 33324

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

Corporation Service Company
1201 Hays Street
P.O. Box NOT acceptable
Tallahassee FL 32301

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FLORIDA

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]
Signature of an officer or director

John R. Stair 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. If, 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.

Corporation Service Company
[Signature]
Signature of Registered Agent

11/18/14
Date

If signing on behalf of an entity:
Stephanie Milnes
Asst. Vice President
Typed or Printed Name

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