

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

1995



STATE OF FLORIDA
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

APPROVED
FILED

6/20/1994

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000003225 (9)

PHC ORLANDO, INC.

C/O SURGICAL HEALTH CORPORATION
990 HAMMOND DRIVE SUITE 300
ATLANTA GA 30328

C/O SURGICAL HEALTH CORPORATION
990 HAMMOND DRIVE SUITE 300
ATLANTA GA 30328

21	26	3	3a
22	27	4	4a
23	28	5	5a
24	29	6	6a
25	30	7	7a

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81	82	83	84	85
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FL

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original of the foregoing as the same appears in the records of the Department of Revenue, Tallahassee, Florida.

12	13
PD GARVIN, SARAH C 990 HAMMOND DRIVE, SUITE 300 ATLANTA GA 30328	
ST RASMUSSEN, GARY W 990 HAMMOND DRIVE, SUITE 300 ATLANTA GA 30328	Delete
D LUTTRELL, WILLIAM B 990 HAMMOND DRIVE, SUITE 300 ATLANTA GA 30328	Delete
D MORPHIS, ROCK A 1911 21ST AVENUE, SOUTH NASHVILLE TN 37212	DST Rock A. Morphis 1911 21st Ave South Nashville, TN 37212

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original of the foregoing as the same appears in the records of the Department of Revenue, Tallahassee, Florida.

SIGNATURE:

Sarah C. Garvin
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICIAL OR DIRECTOR

4/26/95

404-673-1954