

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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RESUBMIT

Please give original
submission date as file date.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1515

Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: _____

REGISTERED AGENT CHANGE
HEALTH EQUIPMENT LOGISTICS & PLANNING, INC.

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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January 18, 2011

FLORIDA DEPARTMENT OF STATE

Division of Corporations
HEALTH EQUIPMENT LOGISTICS & PLANNING, INC.
13727 NOEL RD STE 1400
DALLAS, TX 75240

SUBJECT: HEALTH EQUIPMENT LOGISTICS & PLANNING, INC.
REF: F94000004005

RESUBMIT

Please give original
submission date as file date.

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

FAX Aud. #: H11000013652
Letter Number: 911A00001390

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. The name of the corporation: HEALTH EQUIPMENT LOGISTICS & PLANNING, INC.
2. The principal office address: 13727 Noel Road, Suite 1400, Dallas, TX 75240
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 08/02/1994 Document number: F94000004005
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System1200 South Pine Island RoadPlantation, FL 33324

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

Corporation Service Company1201 Hays Street(P.O. Box NOT acceptable)Tallahassee, FL 32301

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.

Blanca Lozada
(Signature of an officer or director)

Blanca Lozada, Attorney in Fact(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.

Corporation Service Company

By: Sylvia Queppet
(Signature of Registered Agent)

01/11/2011(Date)

If signing on behalf of an entity:

Sylvia Queppet, Asst. Vice President(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

CR2E045 (8/05)

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