

UCC FILLY BY SELVICE SERVICES, INC.

So East Phil Avenue

Vallehouse Floride 32201

Mallahassee, Florida 32301 (850) 681-6528

FOR PICKUP BY UCC SERVICES OFFICE USE ONLY

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October 18, 2000

	CORPORATION NAME (S) AND DOCUMENT NUMBER (S):					
Orth	odonti	c Centers of Florida Inc.				
•		40.8				
Filing Evidence ☑ Plain/Confirmation Co	ру	Type of Document Company Continued Control Con				
□ Certified Copy		□ Certificate of Good Standing				
		□ Articles Only				
Retrieval Request Photocopy	-	 □ All Charter Documents to Include Articles & Amendments □ Fictitious Name Certificate 				
□ Certified Copy		Other 200003428562—5: -10/18/0001016020				
NEW FILINGS		*****35.00 *****35.00 AMENDMENTS				
Profit		Amendment				
Non Profit		Resignation of RA Officer/Director				
Limited Liability	X	Change of Registered Agent				
Domestication		Dissolution/Withdrawal				
Other		Merger				
		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				
OTHER FILINGS		REGISTRATION/QUALIFICATION				
Annual Reports		Foreign San C				
Fictitious Name		REGISTRATION/QUALIFICATION Foreign Limited Liability Reinstatement				
Name Reservation		Reinstatement 57				
Reinstatement		Trademark				
		Other C. COULLIETTE (ICT 1 8 2000				

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, the undersigned corporation organized under the laws of the State of Delaware								
submits the following statement in order to change its registered the State of Florida.	office or registered agent, or both, in	-						
1. The name of the corporation is: Orthodontic Centers of Florida, In	ic	-						
2. The mailing address of the corporation is: North Florida Orthodor	ntic Specialists Magnolia Park Courtyard	<u>-</u>						
111 S. Magnolia, Suite 10 Tallahassee, FL 32301		_						
3. Date of incorporation/qualification: 09/13/94 Do	ocument number: F94000004714	_						
4. The name and address of the current registered agent and office:	;							
Corporation Service Company	SECI TALL							
1201 Hays Street		7						
Tallahassee, FL 32301								
5. The name and address of the new registered agent and office: (P	. O. Box Not Acceptable)							
NRAI Services, Inc.		-						
526 East Park Avenue	TE NDA							
TAllahassee, FL 32301								
The street address of its registered office and the street address of agent, as changed, will be identical.	f the business office of its registered							
Such change was authorized by resolution duly adopted by its boauthorized by the board.	ard of directors or by an officer so							
Bart Palmerno L	10-12-00							
(Signature of an officer, chairman or vice chairman of the board)	(Date)							
Bartholomew F. Palmisano, Jr.; CFO, Secretary and Treasurer (Printed or typed name and title)		-						
Having been named as registered agent and to accept service of corporation, I hereby accept the appointment as registered agent I further agree to comply with the provisions of all statutes relati performance of my duties, and I am familiar with and accept the registered agent.	ve to the proper and complete							
MRAI Services, Inc.	10-17-88							
Signature of Registered Agent)	(Date)							
If signing on behalf of an entity:								
(Typed or Printed Name)	(Capacity)							
* * * FW INC PPE. \$25.00 * :	* *							

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