

F95000001819

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Manatee Medical  
Products and Services  
Inc.

500002619895--7

-08/19/98--01054--024

\*\*\*\*105.00 \*\*\*\*\*35.00

\*Full Thud\*

- FILED  
98 AUG 19 PM 3:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA
- RECEIVED  
98 AUG 19 PM 12:31  
DIVISION OF CORPORATION
- \_\_\_ Art of Inc. File
  - \_\_\_ LTD Partnership File
  - \_\_\_ Foreign Corp. File
  - \_\_\_ L.C. File
  - \_\_\_ Fictitious Name File
  - \_\_\_ Trade/Service Mark
  - \_\_\_ Merger File
  - \_\_\_ Art. of Amend. File
  - ✓ RA Resignation Change
  - \_\_\_ Dissolution / Withdrawal
  - \_\_\_ Annual Report / Reinstatement
  - \_\_\_ Cert. Copy
  - ✓ Photo Copy
  - \_\_\_ Certificate of Good Standing
  - \_\_\_ Certificate of Status
  - \_\_\_ Certificate of Fictitious Name
  - \_\_\_ Corp Record Search
  - \_\_\_ Officer Search
  - \_\_\_ Fictitious Search
  - \_\_\_ Fictitious Owner Search
  - \_\_\_ Vehicle Search
  - \_\_\_ Driving Record
  - \_\_\_ UCC 1 or 3 File
  - \_\_\_ UCC 11 Search
  - \_\_\_ UCC 11 Retrieval
  - \_\_\_ Courier

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

AS 8/19/98 11:50

**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 North Carolina submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1a. The name of the corporation is: Manatee Medical Products and Services, Inc.

1b. The mailing address of the corporation is : 1949 Dupont Court

Deltona, Florida 32725 Attn: Vern Herzog

1c. Date of incorporation: 04/14/95 Document number: F95000001819

2. The name and address of the current registered agent and office:

Galen Goetz

689 Deltona Blvd.

Deltona, FL 32725

3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

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Tallahassee, FL 33201

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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.

L. P. Herzog

(Signature of an officer, chairman or  
vice chairman of the board)

8/17/98

(Date)

L. P. Herzog, President

(Printed or typed name and title)

*Having been named as registered agent and to accept service of process for the above stated corporation, 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.*

Lauren Strong

(Signature of Registered Agent)

8/19/98

(Date)

If signing on behalf of an entity:

Lauren Strong

(Typed or Printed Name)

Client Representative

(Capacity)

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**