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FROM: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
075350000353

ACCT#:

CONTACT: JOSE MOJICA
PHONE: (212) 431-5000
(212) 431-1441

FAX #:

NAME: OLSTEN FLYING NURSES CORP.

AUDIT NUMBER.....H98000024381

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FLORIDA DIVISION OF CORPORATIONS

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TO: DIVISION OF CORPORATIONS
(850)922-4000

FAX #:

FROM: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
075350000353

ACCT#:

CONTACT: JOSE MOJICA

PHONE: (212)431-5000

FAX #:

(212)431-1441

NAME: OLSTEN FLYING NURSES CORP.

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Florida Department

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NO.289

P.2/2



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

December 31, 1998

OLSTEN FLYING NURSES CORP.
175 BROAD HOLLOW RD.
MELVILLE, NY 11747

SUBJECT: OLSTEN FLYING NURSES CORP.
REF: F95000001957

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 phone number of the preparer of the original document must be contained in the lower left-hand corner of the first page of the document.

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

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Darlene Connell
Corporate Specialist

FAX Aud. #: H98000024381
Letter Number: 998A00061188

Florida Department of State, Sandra B. Mortham, Secretary of State

H98000024381

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 office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: OLSTEN FLYING NURSES CORP.
2. The mailing address of the corporation is: 175 BROAD HOLLOW RD., MELVILLE, NY 11747
3. Date of incorporation/qualification: 4/21/95 Document number: F95000001957
4. The name and address of the current registered agent and office:

CT CORPORATION SYSTEM1200 SOUTH PINE ISLAND ROADPLANTATION, FL 33324

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

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.4435 OLD WINTER GARDEN ROADORLANDO, FL 32802

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.

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

12/30/98
(Date)

JOSE MOJICA, ASST. SECY.

(Printed or typed name and title)

(Date)

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.

[Signature]
(Signature of Registered Agent)

12/30/98
(Date)

If signing on behalf of an entity:

MARC MOEL

(Typed or Printed Name)

ASSISTANT SECRETARY
(Capacity)

CR2E045(4/95)

Blumberg Excelsior
62 White St.

New York, NY 10013
212-431-5900 ext 640

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