

# F95000001957

CT CORPORATION

CORPORATION(S) NAME

(1) ~~Intelistaf Health Services (Staffing), Inc.~~

(2) Intelistaf Flying Nurses Corp.

FILED  
2002 MAR 12 PM 2:28  
TALLAHASSEE, FLORIDA  
CLERK OF SUPERIOR COURT

600005097256-15  
03/12/02-01054-015  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input checked="" type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

3/12/02

Order#: 4922185

Ref#: \_\_\_\_\_ kf

Amount: \$ \_\_\_\_\_

RECEIVED  
02 MAR 12 AM 11:30  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

C. Coulliette MAR 12 2002

**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 : Intelistaf Flying Nurses Corp.

2. The mailing address of the corporation : 1000 S. Rodney Parham Road

Little Rock, Arkansas 72204

3. Date of incorporation/qualification: April 21, 1995 Document number: F95000001957

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

Blumberg Excelsior Corporate Services, Inc.

4435 Old Winter Garden Road

Orlando, FL 32802

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

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road,

Plantation, Florida 33324

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)

02/14/02  
(Date)

R. Reed Thompson VP of Finance  
(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.

CT Corporation System  
By: M. S. Green  
(Signature of Registered Agent)

3/1/02  
(Date)

If signing on behalf of an entity:

M. S. Green  
(Typed or Printed Name)

Assistant Secretary  
(Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*