

ACCOUNT NO. : 07210000032

REFERENCE :

AUTHORIZATION

COST LIMIT : \$ 70.00

ORDER DATE: December 5, 1997

ORDER TIME : 10:58 AM

ORDER NO. : 624122-040

CUSTOMER NO: 5020685

CUSTOMER: Ms. Marjorie Porter

Sun Healthcare Group 101 Sun Lane, N.e.

Albuquerque, NM 87109

CHANGE OF AGENT

NAME:

SCRS & COMMUNICOLOGY, INC. OF

OHIO

000002371720--0

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: STACY EARNEST



Florida Department of State, Jim Smith, Secretary of State

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 submits the following statement in order to change its registered office			
or registered agent, or both, in the State Florida.			
1a. The name of the corporation is:			
SCRS & COMMUNICOLOGY INC. OF OHIO			
1b. Date of incorporation: 06/14/95		Document numi	क्टिंश ७
2. The name and address of the curre C T CORPORATION SYSTEM	nt registered a	gent and office:	DEC 15
1200 SO. PINE ISLAND DRIVE PLAN	NOITATION	FL	丽宫 33324
3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)			
CORPORATION SERVICE COMPANY			
1201 Hays Street, Tallahassee, Florida 32301			
The street address of its registered agent 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.			
Michael Be.	MICHAEL T ASST. SEC		
SIGNATURE December 3, 1997 DATE		d or printed name	and title
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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. CORPORATION SERVICE COMPANY SIGNATURE BY: Vicki Achieler			
	DATE	12/12	197