F9500004014

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SECKETARY OF STATE
ALLAHASSEE, FLORIDA

PARS

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: AmSurg Brevard, Inc. (Name of Corporation)					
(Name of Corporation	011)				
DOCUMENT NUMBER: F95000004214					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Stephanie Thomas					
(Name of Contact Person)					
Paranet Corporation Services					
(Firm/Company)					
2761 Venture Drive Suite 260					
3761 Venture Drive, Suite 260 (Address)					
(i radioss)					
Duluth, GA 30096					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
Stanhania Thomas	200 > 277 0077				
Stephanie Thomas at (8) (Name of Contact Person)	Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.					
<u>Mailing Address:</u> Amendment Section	Street Address: Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327	Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle				
	Tallahassee, FL 32301				

'STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	provisions of sections 607.0502, 617.0502, nge is submitted for a corporation organiz r to change its registered office or register	ed under the laws of the State of Tenn	essee	
1. The name of the corporation: AmSurg Brevard, Inc.				
	office address: 20 Burton Hills Blvd., 5			
3. The mailing ac	ddress (if different):			
4. Date of incorp	oration/qualification: 08/31/95	Document number: F950000	04214	
	street address of the current registered age			
	CT Corporation System			
	1200 S. Pine Island Rd.		OS TALL	
	Plantation, FL 33324		DEC 26 CRETAR LAHASS	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	NRAI Services, Inc.		STATE LORID	
	2731 Executive Park Drive, S	Suite 4	DA -	
	(P.O. Box NOT acceptable) Weston, FL 33331	•		
The street addre	ss of its registered office and the street as be identical.	ddress of the business office of its reg	gistered agent,	
	s authorized by resolution duly adopted e board, or the corporation has been noti			
Claire M. Gulmi, Secretary (Signature of an officer or director) Claire M. Gulmi, Secretary (Printed or typed name and title)				
	the appointment as registered agent and o comply with the provisions of all statuted I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change.	agree to act in this capacity. tes relative to the proper and complet tation of my position as registered ago registered office address, I hereby co	e performance ent. Or, if this infirm that the	
Lypin	nature of Registered Agent)	17/6/pb		
If signing on bel	half of an entity:	·		
•	nomas, Special Asst. Secy.			

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