

-96000001461

ACCOUNT NO. : 072100000032

REFERENCE: 248877 4350891

AUTHORIZATION :

Patricia Pyrito

COST LIMIT : \$ 35.00

ORDER DATE: February 4, 1997

ORDER TIME : 9:13 AM

ORDER NO. : 248877-020

100002094891--2

CUSTOMER NO:

4350891

CUSTOMER: Robert Pommerville, Esq.

Beverly Enterprises, Inc.

5111 Rogers Avenue

Ste 40-a

Fort Smith, AR 72919

CHANGE OF AGENT

NAME: SPECTRA REHAB ALLIANCE, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Debbie Skipper

Florida Department of State, Jim Smith, Secretary of State

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

| <u> </u> | 110110011 | 01011010 | |
|---|---|--|--|
| 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: SPECTRA REHAB ALLIANCE, INC. | | | |
| | | | |
| 1b. Date of incorporation: 06/07/ | 96[| Document number_ | F96000001461 |
| The name and address of the current registered agent and office: C T CORPORATION SYSTEM | | | |
| 1200 SO. PINE ISLAND DRIVE PLAN | TATION | FL | 33324 |
| 3. The name and address of the new re (P.O. Box Not Acceptable | | and office: | TEB! |
| CORPORATION SERVICE COMPANY | | | 175 |
| 1201 Hays Street, Tallahassee, Florida 32301 | | | PH |
| The street address of its registered agent and the street address of the business of fice 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. | | | |
| 1/011.7 12. (Colm) | HOLLY A. OD ASST SECRE | | |
| SIGNATURE | Typed | or printed name an | d title |
| DATE | | | |
| HAVING BEEN NAMED AS REGISTERE PROCESS FOR THE ABOVE STATED OF IN THIS CERTIFICATE, I HEREBY ACC AGENT AND AGREE TO ACT IN THIS WITH THE PROVISIONS OF ALL STAT PLETE PERFORMANCE OF MY DUTIES THE OBLIGATION OF MY POSITION A | CORPORATION A EPT THE APPOI CAPACITY. I F TUTES RELATIVE AND I AM FA S REGISTERED CORE SIGNATURE BY | AT THE PLACE DE NTMENT AS REGI: URTHER AGREE TO E TO THE PROPER MILIAR WITH AND AGENT. PORATION SERVICE DEBBIE SKIPPER | SIGNATED STERED O COMPLY AND COM- O ACCEPT |
| | DATE | 1/2 | 1/97 |