## F96000003924



ACCOUNT NO. : 07210000032

REFERENCE :

665263 . .

5124708

AUTHORIZATION

COST LIMIT

ORDER DATE : July 16, 2002

ORDER TIME :

2:41 PM

ORDER NO. : 665263-065

CUSTOMER NO:

5124708

600006497506--7

CUSTOMER:

Peter Laterza, Vice President

Omnicare, Inc

Suite 1600

100 E. River Center Blvd. Covington, KY 41011-1663

CHANGE OF AGENT

NAME:

SPECIALIZED PATIENT CARE

SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Ta-tanisha Adams

C. Coulliste JUL 1 8 2002

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

Pursuant to the provisions of sections 607.0302; 617.0302, 607.		ioriaa Siaimes,	on the second
the undersigned corporation organized under the laws of the State		rent or both in	.: - m <del>aras pa artis -</del>
submits the following statement in order to change its registered	office or registered us	em, or com, in	
the State of Florida.	and the second s	78 8 18	
1. The name of the corporation :			
SPECIALIZED PATIENT CARE SERVICES, INC.	The state of the s		Toursistes i
2. The mailing address of the corporation 100 E. RIVERCENTER	BLVD,	Part to In	
COVINGTON, KY 41011			
3. Date of incorporation/qualification: July 31, 1996	Document number	±96000003924 → N	— nakalah —nakamana
4. The name and address of the current registered agent and office	e:		ere e e e e e e e e e e e e e e e e e e
	•		
CT Corporation System	<del> </del>	www. sgm mulii s	W. W. W.
1200 South Pine Island Road		and the state of t	y the factor of the same
Plantation, FL 33324	and the second s		i
5. The name and address of the new registered agent (if changed (P. O. BoxNot Acceptable)  Corporation Service Company		ice (ii changed).	·
			== r ·
1201 Hays Street		ja njakanaja ja an	Control of the second of the s
Tallahassee, FL 32301		e a san e se se proprie de	An Sugahes (1994)
The street address of its registered office and the street address agent, as changed, will be identical.			
Such change was authorized by resolution duly adopted by its bauthorized by the board.	oard of directors or b	y an officer so	
authorized by the board.	1 1	( )	'L
(Signature of an officer, chairman or vice chairman of the board)	— — <u>— 7/12-</u> /{	Date)	e e e e e e e e e e e e e e e e e e e
(Signature of an origin, Santana		·	
PATRICIA PIZZUTO, Attorney in Fact		Little Budden Attack	1 04 E-00 TO THE
(Printed or typed name and title)	process for the above	e stated	
Having been named as registered agent and to accept service of corporation, I hereby accept the appointment as registered agen I further agree to comply with the provisions of all statutes relat performance of my duties, and I am familiar with and accept the	it and agree to act in the inverse in the proper and a colligation of my pos	this capacity. complete ition as	
registered agent. Corporation Service Company	7/12/02	en ger George	· · · · · · · · · · · · · · · · · · ·
(Signature of Registered Agent)	(Date)		The state of the s
If signing on behalf of an entity:  Laura R. Duniap Asst. Secretary		e e e e e e e e e e e e e e e e e e e e	
(Typed or Printed Name)	(Capacity)		e ve <del>ndika ağıyılı</del> Tekşe <del>ndika ağıyılı</del>
* * * FILING FEE: \$35.00 * * *			

P.O. Box 6327

TALLAHASSEE, FL 32314

CR2E045(9/00)

**DIVISION OF CORPORATIONS**