

F98000007115

Greenberg Traurig

Requestor's Name

Address

Michelle 425-8526

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Flagship Immunology of Golden Glades, Inc. F98-6690
(Corporation Name) (Document #)
2. Flagship Pharmacy of Pompano, Inc. F98-6398
(Corporation Name) (Document #)
3. FFIT of Broward, Inc. F98-7115
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

☐ Mail out

☒ Pick up time call me

☐ Will wait

☐ Photocopy

☒ Certified Copy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
99 FEB 18 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200002776982--5

-02/16/99--01048--031

*****656.25 *****43.75

NOT RECORDED
02-11-99

Examiner's Initials

See 2/18



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 16, 1999

GREENBERG TRAURIG

TALLAHASSEE, FL

SUBJECT: FHH OF BROWARD, INC.
Ref. Number: F98000007115

We have received your document for FHH OF BROWARD, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6908.

Teresa Brown
Corporate Specialist

Letter Number: 499A00006923

RECEIVED
99 FEB 18 AM 11:25
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 607.0502, 617.0502, or 607.1508 Florida Statutes, undersigned corporation organized under the laws of the State of Florida 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 is: **FHH OF BROWARD, INC.**

2. The mailing address of the corporation is:

8000 Governor's Square, Suite 300, Miami Lakes, Florida 33016

3. Date of Incorporation: 12/30/98 Document No. F98000007115

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

CT Corporation

1200 South Pine Island Road

Plantation, Florida 33324

5. The name and address of the new registered agent and office:

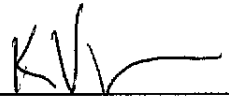
Kenneth Veneziano

8000 Governor's Square, Suite 300

Miami Lakes, Florida 33016

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 office authorized by the boards.



(Signature of an officer, chairman,
or vice chairman of the board)

Kenneth Veneziano

(Printed or typed name)

2/9/99

(Date)

Exec VP

(Capacity)

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99 FEB 18 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 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 registered agent.

By: KV
(Signature of Registered Agent)

Kenneth Venevsky
(Typed or Printed Name)

2/4/99
(Date)

(Capacity)