

G59798  
G59798



THE UNITED STATES  
CORPORATION  
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 170293 5053757

AUTHORIZATION :

COST LIMIT : \$ 35.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 APR 15 PM 12:21

FILED

ORDER DATE : March 16, 1999

ORDER TIME : 11:12 AM

ORDER NO. : 170293

CUSTOMER NO: 5053757

CUSTOMER: Ms. Kathy Polk  
Protective Life Insurance  
2801 Highway 280 South

300002812443--3

Birmingham, AL 35223

RA  
Change

CHANGE OF AGENT

United Dental Care of Florida

NAME: ~~INTERNATIONAL DENTAL PLANS,~~  
~~INC.~~

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Jahna Wilson

WPR  
4/16/99

\*02250, 00721, 00524, 00622

RECEIVED  
99 MAR 19 PM 1:36  
DIVISION OF CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

March 19, 1999

CSC  
1201 Hays Street  
Tallahassee, FL 32301

SUBJECT: UNITED DENTAL CARE OF FLORIDA, INC.  
Ref. Number: G59798

**RESUBMIT**  
Please give original  
submission date as file date.

We have received your document for UNITED DENTAL CARE OF FLORIDA, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

Please fill in paragraph #4.

If you have any questions concerning the filing of your document, please call (850) 487-6907.

Annette Ramsey  
Corporate Specialist

Letter Number: 799A00013888

RECEIVED

99 APR 15 PM 4:41

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Florida Department of State, Sandra B. Mortham, Secretary of State

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

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 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: United Dental Care Of Florida, Inc.
2. The mailing address of the corporation is: 2801 HIGHWAY 280 SOUTH  
BIRMINGHAM, AL 35223
3. Date of incorporation/qualification: 9-16-83 Document number: G59798
4. The name and address of the current registered agent and office:  
CT Corporation System  
1200 South Pine Island Road  
Plantation, FL 33324
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)  
Corporation Service Company  
1201 Hays Street  
Tallahassee, FL 32301

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 officer so authorized by the board.

Eugene A. Beatty  
(Signature of an officer, chairman or vice chairman of the board)

3/15/99  
(Date)

EUGENE A. BEATTY, Assistant Secretary

(Printed or typed name and title)

(Date)

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. 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

Karen B. Rozar  
(Signature of Registered Agent)

3/17/99  
(Date)

If signing on behalf of an entity:

KAREN B. ROZAR

Assistant Vice President

(Typed or Printed Name)

(Capacity)