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March 10, 2000

100003166891--03/13/00--01089--002 *****35.00 *****35.00

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Butterfield Oxygen and Medical Equipment, Inc.

Dear Sir or Madam:

Enclosed for filing you will find a Statement of Change of Registered office or Registered Agent for Butterfield Oxygen and Medical Equipment, Inc., a Florida corporation. We have also enclosed our check in the amount of \$35 representing the required filing fee.

Sincerely,

Bruce R. Abernethy, Jr.

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BRA/jlb Enclosures

Machans

T. LEWIS MAR 2 2 2000

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

Pursuant to the provisions of sectio	ns 607.0502, 617.0502,	607.1508, or 617.1.	508, Florida Statut da	es,
the undersigned corporation organiz submits the following statement in or	ed under the laws of the	June 0)		in
	raer to change us registe	erea office or region	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
the State of Florida.1. The name of the corporation is:	BUTTERFIELD OXYGE	EN AND MEDICAL	EQUIPMENT,	ENC.
1. The name of the corporation				
2. The mailing address of the corpora	ation is: 1161 S. U.	S. #1, FT. PI	ERCE, FL34950)
3. Date of incorporation/qualificatio	n: 3-29-84	Document number	r: G93808	
4. The name and address of the curre		ffice:		
MAX E. CRO	SS <u>-</u>		.	
320 AVENUE A	L		00 SEC TALL	
FÖRT PIERCE	, FLA. 33454			ì
5. The name and address of the new	registered agent and office	ce: (P. O. Box Not A	Acceptable) $\overline{\omega}$	-
David A. W.	right		- 99 E E]
1161 8.0.5.	. # [3.1		
F. Pierre,	Fla. 34950		- PA 30	
The street address of its registered of agent, as changed, will be identical.		ľ		
Such change was authorized by reso authorized by the board.	olution duly adopted by	its board of director	s or by an officer so)
authorized by the source.			Park 10, 2000	
(Signature of an officer, chairman or	vice chairman of the board)		(Date)	,
David H. Wright, Preside	A true and title)			
Having been named as registered a corporation, I hereby accept the ap I further agree to comply with the p performance of my duties, and I am registered agent.		ce of process for the agent and agree to relative to the proport the obligation of the column of the	e above stated act in this capacity er and complete my position as	•
x O		March 101	2000	
(Signature of Registered Ag	ent)	(Date)		
If signing on behalf of an entity:				
(Typed or Printed Name)	, ,	(Capacit	у)	
*	* * FILING FEE: \$35	.00 * * * 00.		
CR2E045(7/97) Division of CorporationS	P.O. Box 6327	(Tallahassee; F	TL 32314	

DIVISION OF CORPORATIONS