

H43874
RIDGE & LANTINBERG, P.A.

Attorneys and Counselors at Law

GEORGE E. RIDGE
RICHARD J. LANTINBERG
NATALIE A. NICE

225 Water Street, Suite 900
Jacksonville, Florida 32202
Telephone (904) 358-1000
Facsimile (904) 353-6335

July 30, 1997

VIA U.S. MAIL

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

Dear Sir:

Re: Resignation as Registered Agent
for Integrated Health ~~Systems~~ ^{Services}, Inc.

Please find enclosed an original and one copy of Resignation of George E. Ridge as Registered Agent.

Please file the original and return the "filed" stamped copy to me in the self-addressed stamped envelope enclosed.

Also enclosed is a check in the amount of \$35.00.

If you have any questions, please call.

Sincerely,

Kim Tilson

Kimberly Tilson

KT/kmt

Enclosures

400002253444--6
-07/31/97--01013--020
*****35.00 *****35.00

*Kim Tilson gave Authorization
to correct the Corporate name.
8/7 JB*

RA resig.

VB AUG 8 1997


FILED
97 JUL 31 PM 1:03
SECRETARY OF STATE
TALLAHASSEE FLORIDA

RESIGNATION OF GEORGE E. RIDGE AS REGISTERED AGENT

The undersigned, George E. Ridge, hereby resigns his agency as registered agent for **INTEGRATED HEALTH SYSTEMS, INC.**, effective immediately. Pursuant to 607.0502, Fla. Stat., registered agent hereby certifies that a true and correct copy of this document has been mailed to the corporation at the following address:

3599 University Boulevard #109
Jacksonville, Florida 32216

FILED
97 JUL 31 PM 1:03
SECRETARY OF STATE
TALLAHASSEE FLORIDA


George E. Ridge, Esq.
225 Water St., Ste. 900
Jacksonville, FL 32202
Phone (904) 358-1000
Facsimile (904) 353-6335

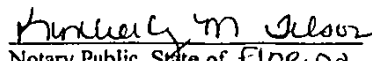
STATE OF FLORIDA
COUNTY OF DUVAL

I HEREBY CERTIFY, that on this day personally appeared before me, an officer duly authorized to administer oaths, and take acknowledgments, George E. Ridge. He is personally known to me or has produced his driver's license as identification.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at _____,
this 30th day of July, 1997.



Kimberly M. Tilson
MY COMMISSION # CC530950 EXPIRES
February 7, 2000
BONDED THRU TROY FAIR INSURANCE, INC.


Notary Public, State of FLORIDA
Kimberly M. Tilson
(Printed Name)