rage 1 of 1

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000234915 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: MACFARLANE FERGUSON & MCMULLEN

Account Number : 076077001654

: (813)273-4304

Fax Number

: (813)273-4396

REGISTERED AGENT CHANGE

ALL FLORIDA ORTHOPAEDIC ASSOCIATES, P.A.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

November 4, 2009

FLORIDA DEPARTMENT OF STATE

ALL FLORIDA ORTHOPAEDIC ASSOCIATES, P.A.

4600 4TH ST. N.

ST. PETERSBURG, FL 33703

SUBJECT: ALL FLORIDA ORTHOPAEDIC ASSOCIATES, P.A.

REF: H80326

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain a statement that the street address of the registered office and the street address of the business office of its registered agent, as changed, will be identical.

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) 245-6925.

Teresa Brown Regulatory Specialist II

FAX Aud. #: E09000234915 Letter Number: 009A00034849

((H09000234915 3)))

2009 NOV -5 PM 3: 02
TALLAHASSEE. FLORIDA

STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT FOR ALL FLORIDA ORTHOPAEDIC ASSOCIATES, P.A.

Pursuant to the provisions of Section 607.0502 of the Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office and registered agent in the State of Florida.

- 1. The name of the corporation is All Florida Orthopaedic Associates, P.A.
- 2. The principal office and mailing address is 4600 4th Street N., St. Petersburg, Florida 33703.
 - 3. The date of incorporation is October 10, 1985, under Document Number H80326.
- 4. The name and street address of the current registered agent and registered office on file with the Florida Department of State is:

CorpDirect Agents, Inc. 515 East Park Avenue Tallahassee, FL 32301

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

James W. Goodwin 201 N. Franklin Street, Suite 2000 Tampa, Florida 33602

This address and the address of the business office of its registered agent, as changed, will be identical.

This change of registered agent and registered office was authorized by resolution duly adopted by its board of directors on October 22, 2009.

Dated: October 30, 2009.

Robert G. Hamilton, President

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 obligations of my position as registered agent.

James W. Goodwin Registered Agent

(H09000234915 3)))