H86590

Florida Department of State
Division of Corporations
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.

(((H09000241320 3)))

H090002413203ABCV

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 : SMITH HULSEY & BUSEY
Account Number : 075030000653
Phone : (904)359-7700
Fax Number : (904)359-7712

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 NOV 16 AM 10:10

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: missy.poston@bmcjax.com

RECEIVED
2009 NOV 16 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE
PAVILION PLAZA PHARMACY, INC.

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

Electronic Filing Menu Corporate Filing Menu Help

T Roberts NOV 17 2009

(((H09000241320 3)))

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, 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 or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Pavilion Plaza Pharmacy, Inc.
2. The principal office address: 1325 San Marco Blvd. #902 Jacksonville, FL 32207
3. The mailing address (if different):
4. Date of incorporation/qualification: 11/21/85 Document number: H86590
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Harvey Granger
1325 San Marco Blvd., Suite 902
Jacksonville, FL 32207

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

New Address:
841 Prudential Drive, Suite 1802
P.O. Box NOT acceptable
Jacksonville, Florida 32207

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 NOV 16 AM 10:10

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, or the corporation has been notified in writing of the change.

Signature of an officer or director — Harvey Granger - ST, Printed or typed name and title

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent — 11/5/09, Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

(((H09000241320 3)))