J54591

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SEPRETARY OF STATE
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PR/201



N SERVICE COMPANY.					
ACCOUNT NO. : 072100000032					
REFERENCE : 918245 5020685					
AUTHORIZATION: Spelle Rena					
COST LIMIT : \$ 95.00					
ORDER DATE: May 25, 2007					
ORDER TIME : 9:32 AM					
ORDER NO. : 918245-045					
CUSTOMER NO: 5020685					
CHANGE OF AGENT					
NAME: MEDIPLEX MANAGEMENT OF PALM BEACH COUNTY, INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Heather Chapman EXT# 2908					

EXAMINER:

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

statement of cha	inge is submitted for a corporation org	502, 607.1508, or 617.1508, Florida Statanized under the laws of the State of $\frac{\mathrm{Flo}}{\mathrm{State}}$ istered agent, or both, in the State of Flor	orida		
1. The name of the corporation: MEDIPLEX MANAGEMENT OF PALM BEACH COUNTY, INC.					
	office address:nue NE, Albuquerque, NM 87109				
3. The mailing a	address (if different):				
4. Date of incorp	poration/qualification: 01/30/1987	Document number: J54591	208		
5. The name and street address of the current registered agent and registered office on file will the					
	NRAI Services, Inc.	\$55K	m e		
	2731 Executive Park Drive, Suite 4	The state of the s	一般の		
	Weston, FL 3331	OKIO	LED Y 29 PH 12: 13		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):					
	Corporation Service Company				
	1201 Hays Street				
	(P.O. Box NOT acceptal	ble)			
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, or the corporation has been notified in writing of the change.					
	ure of an officer or director)	Maureen Cullen, Attorney In Fact (Printed or typed name and fille	,		
I herebylaccept 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.					
Corporation Service Company By: Why had to Company 5-25-07					
	gnature of Registered Agent)	(Date)			
If signing on behalf of an entity: Michelle R. Vannoy, Assistant VP					
(Typed or Printed Name)					

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