

L02000019391

(Requestor's Name)

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(Business Entity Name)

(Document Number)

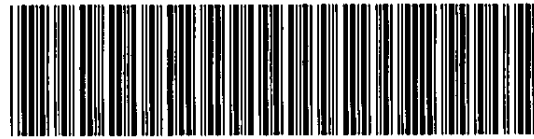
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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 488239 7516704

AUTHORIZATION :

COST LIMIT : \$ 25

*Lyndell*

ORDER DATE : January 8, 2013

ORDER TIME : 11:03 AM

ORDER NO. : 488239-015

CUSTOMER NO: 7516704

CHANGE OF AGENT

NAME: AMERICAN MANAGED CARE, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Harry B. Davis -- EXT# 2926

EXAMINER: \_\_\_\_\_

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: American Managed Care, LLC

2. (a) Principal office address of limited liability company: 100 Central Avenue, Suite 200  
(Note: MUST BE STREET ADDRESS) St. Petersburg, FL 33701

(b) Mailing address of limited liability company: \_\_\_\_\_  
(Note: MAY BE POST OFFICE BOX) \_\_\_\_\_

July 31, 2002 L02000019391  
3. Date of filing/registration in Florida 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Sandip I. Patel

Registered Office Address: 100 Central Avenues, Suite 200  
St. Petersburg, FL 33701

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: Corporation Service Company

NEW Registered Office Address: 1201 Hays Street  
(MUST BE FLORIDA STREET ADDRESS) Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Deepak Desai  
(Signature of a member or authorized representative of a member)

Deepak Desai  
(Printed or typed name of signer)

*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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing.*

By: [Signature]  
(Signature of Registered Agent) Corporation Service Company

**Harry B. Davis**  
**Asst. Vice President**

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
**FILING FEE: \$25.00**