

L02000024308

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

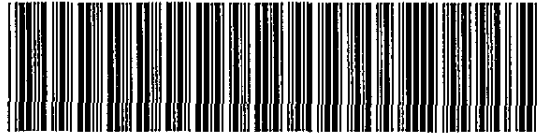
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J. BRYAN SEP - 9 2004



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 877999 5164981
AUTHORIZATION : Patricia Pajuts
COST LIMIT : \$ 25.00

ORDER DATE : September 8, 2004
ORDER TIME : 9:25 AM
ORDER NO. : 877999-020
CUSTOMER NO: 5164981
CUSTOMER: Ms. Jennifer Smith
Cogent Healthcare, Inc.
Suite 1400
2600 Michelson Dr
Irvine, CA 92612-6529

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TALLAHASSEE, FLORIDA

CHANGE OF AGENT

NAME: COGENT HEALTHCARE OF
PENSACOLA, LLC

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CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER: _____

