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Attorneys-At-Law

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- (Board Certified Real Estate Attorney)
- (Board Certified City, County and Local Government Attorney)
- ▲ (Certified Circuit Civil Mediator)
- ▲ (Certified Family Law Mediator)
- ▲ (Also Admitted in Iowa)

August 18, 2004

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

Priority Access Care, LLC Articles of Amendment

Ladies and Gentlemen:

Enclosed please find a Statement of Change of Registered Office and Registered Agent filed by Priority Access Care, LLC.

I've enclosed a check in the amount of \$25.00 for the cost of filing the above Amendment.

Should you have any questions regarding the enclosed, please feel free to contact me at the telephone number above. Thank you for your cooperation.

Sincerely

Carrie E. Lademan

CEL/kma

Enclosure

3200 Tamiami Trail N. Suite 200 Naples, FL 34103

TEL (239) 649-6555 FAX (239) 649-7342

www.wpl-legal.com

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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. The name of the limited liability company is: Priority Access Care, LLC 2. The mailing address of the limited liability company is: 15090 Top Sail Court, Naples Florida 34119. February 6, 2004 L0400010444 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Carrie E. Lademan Name 3200 Tamiami Trail North, Suite 200 Address Naples, Florida 34103 City, State and Zip 6. The name and address of the new registered agent and/or office: To anne Beightol 1559D Top Sail Court Florida street address (P.O. Box NOT acceptable) Nume 1559D Top Sail Court Florida street address of 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 inhibit company, it is hereby confirmed that the change or changes are made, the Florida street address of the registered of the members of the limited halfily company or as otherwise provided in the articles of organization of the operating agreement of the limited halfily company. (Signature of a member of ambibined representative of a member) Neal Beightol, Nember (Finance of typed name of signee) 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 address. I hereby confirm that the limited liability company has been notified in writing of this change. (Signature of Registered Agent)	· · · · · · · · · · · · · · · · · · ·
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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FILING FEE: \$25.00