



Nov-05-04 06:49A

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11-04-2004 05:12PM FROM-BROAD AND CASSEL

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Florida Department of State
Division of Corporations
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REGISTERED AGENT CHANGE

ASSOCIATED FAMILY PHYSICIANS OF BOCA RATON, P.L.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

11-04-2004 05:12PM FROM-BROAD AND CASSEL
Fax Audit # H04000218049 3

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T-112 P 002/002 F-884

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: Associated Family Physicians of Boca Raton, P.L.
2. The mailing address of the limited liability company is: 9910 Saddlefoot Boulevard, Suite 1
Boca Raton, Florida 33428-6692

January 7, 1999

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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:

Joel Kornberg, M.D.

Name

7301-A West Palmetto Park Road, Suite 305C

Address

Boca Raton, Florida 33433

City, State and Zip

6. The name and address of the new registered agent and/or office:

B&C Corporate Services, Inc.

Name

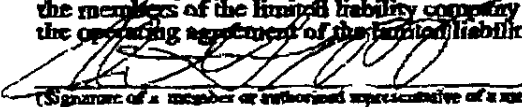
100 S.E. Third Avenue, Suite 2700

Florida street address (P.O. Box NOT acceptable)

Fort Lauderdale, FL 33394

City, State and Zip

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.


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

Mitchell E. Goldstein, D.O., President of Mitchell E. Goldstein, D.O., P.A.
(Printed or typed name of signer) a Manager of Associated Family Physicians of Boca Raton, P.L.

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 of this change.

William C. Phillips
(Signature of Registered Agent)

President of B&C Corporate Services, Inc.

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

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FILING FEE: \$25.00

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04 NOV - 11 AM 10:27
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