## 199000008104

## Medicine Shoppe 4

Richard B. Patten, R.Ph. 225 Key Deer Blvd. Big Pine Key, FL 33043-4905

CR2E031(7/97)

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Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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NEW FILINGS		AM	<u>IENDMENTS</u>		-	SNO
Profit Not for Profit Limited Liability Domestication Other		Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger				
OTHER FILINGS		RE	GISTRATION/QUA	<u>LIFICATION</u>		
Annual Report Fictitious Name			Foreign Limited Partnership Reinstatement Trademark Other			
				Examiner's Initial	ls	

## 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: The Medicine Shoppe L.L.	c <b>.</b>
2. The mailing address of the limited liability company is: 225 Key Deer Blvd	
Big Pine Key, Florida 33043	
November 23, 1999 L9900008104	
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 recording Department of State:  CORPORATION SERVICE COMPANY  Laura R. Dunlap  Name  1201 Hayes Street  Address  Tallahassee, Florida 32301  City, State and Zip	SECRETARY DIVISION OF C
6. The name and address of the new registered agent and/or office:  Richard B. Patten	TARY OF STATOF CORPORATE
225 Key Deer Blvd.  Florida street address (P.O. Box NOT acceptable)	ATIONS
Big Pine Key FL 33043	
City, State and Zip	·
If the limited liability company is not organized under the laws of the State of Florida, it is confirmed that after the change or changes are made, the Florida street address of the regist and the business office of the registered agent will be identical. Or, in the case of a Florida liability company, it is hereby confirmed that the change(s) was/were authorized by an affir the members of the limited liability company or as otherwise provided in the articles of organized the operating agreement of the limited liability company.  (Signature of a member or authorized representative of a member)	tered office
Richard B. Patten  (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and agree to act in this capacity. I fucomply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligations of my position as registered agent as proChapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered address, I hereby confirm that the limited liability company has been notified in writing of Signature of Registered Agent)	orther agree to of my duties, ovided for in stered office this change.

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

INHS18(10/99)

**FILING FEE: \$25.00**