

M04000002742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN NOV 19 2004

# Cors & Bassett, LLC

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November 8, 2004

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

Re: OxyLife Lake City, LLC

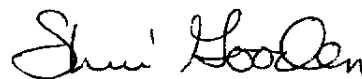
Dear Sir or Madam:

Enclosed for filing with your office is the Statement of Change of Registered Office for OxyLife Lake City, LLC, Florida document number M04000002742. Lake City has changed the suite number for the company and this filing is necessitated by that change. Our firm check in the amount of \$25 is enclosed to cover the cost of filing.

Please update your records accordingly, and return a file stamped copy of the Statement of Change to me in the enclosed, self-addressed, stamped envelope.

Thank you for your assistance and please feel free to contact me should you have any questions.

Sincerely,



Sheri Freese Gooden  
Legal Assistant

enclosures

249385.3

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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: OxyLife Lake City, LLC
2. The mailing address of the limited liability company is : 155 N.W. Enterprise Way, Suite 103  
Lake City, FL 32055

7/9/04

M04000002742

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:

Linda Jones

Name

155 N.W. Enterprise Way, Suite 102

Address

Lake City, FL 32055

City, State and Zip

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

Linda Jones

Name

155 N.W. Enterprise Way, Suite 103

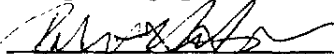
Florida street address (P.O. Box NOT acceptable)

Lake City

FL 32055

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)

Robert H. Hart, Managing Member

(Printed or 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, 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.*

(Signature of Registered Agent)

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

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