

M72645



ACCOUNT NO. : 072100000032

REFERENCE : 124972 4346117

AUTHORIZATION :

Patricia Pizito

COST LIMIT : \$ 35.00

ORDER DATE : February 4, 1999

ORDER TIME : 10:47 AM

ORDER NO. : 124972

100002847421--0

CUSTOMER NO: 4346117

CUSTOMER: Anna Norcia, Corp Paralegal
Cobe Laboratories, Inc
1209 Quail Street
Lakewood, CO 80215-4498

RECEIVED

99 APR 22 PM 12:30

CHANGE OF AGENT

NAME: GAMBRO HEALTHCARE OF FLORIDA, INC

FILED
99 APR 22 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

*RA. Change
4-22-99
CC*

Florida Department of State, Sandra B. Mortham, Secretary of State

*** FILING FEE: \$35.00 ***

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida 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 corporation is: Gambro Healthcare of Florida, Inc.
2. The mailing address of the corporation is: 1185 Oak Street
Lakewood, CO 80215-4498
3. Date of incorporation/qualification: March 18, 1988 Document number: M72645
4. The name and address of the current registered agent and office:

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

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The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Lynn D. Meyer
(Signature of an officer, chairman or vice chairman of the board)

4/15/99
(Date)

Lynn Meyer, Assistant Secretary

(Printed or typed name and title)

(Date)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 obligation of my position as registered agent.

Corporation Service Company

Karen E. Wehner
(Signature of Registered Agent)

4-20-99
(Date)

If signing on behalf of an entity:

Karen E. Wehner

(Typed or Printed Name)

Assistant Vice President

(Capacity)