N42700

(Re	questor's Name)	
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		





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RA. Charge

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: BAPTIST HEALTH SOUTH Florida, Inc.

(Name of Corporation)

DOCUMENT NUMBER: N42700

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

FELICIA E. GONZALEZ

BAPTIST HEALTH SOUTH FLORIDA. INC.
6855 Red Road-Suite 500

Coral Gables. FL 33143

For further information concerning this matter, please call:

Felicia E. Gonzalez at (786) 662-7022

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHAPE OF REGISTERED OFFICE OR REGIS FOR CORPORATIONS

RED AGENT OR BOTH

Pursuantto the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation

organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: [DAPII] ITEAL	
2. The principal office address: 6855 RED Roc	d. Coral Gobber, FL33143
3. The mailing address (if different):	
4. Date of incorporation/qualification: 1/18/02	Document number: NY2700
5. The name and street address of the current registered agent Florida Department of State:	and registered office on file with the
<u>LEHMAN, JODY</u> 6855 Red Road Coral Gables, FL 33143	changed) and or registered office (if changed) and or registered office (if changed)
6. The name and street address of the new registered agent (if	changed) and or registered office(if changed)
DAVID R. FRIEDMAN 6855 Red Road Coral Gables, FL 33143	
The street address of its registered office and the street address changed will be identical.	s of the business office of its registered agent, as
Such change was authorized by resolution duly adopted by its	board of directors or by an officer so authorized
by the board, or the comporation has been notified in writing of	
	David R. Friedman Corporate Vice President and General Counsel
Signature of an officer or director)	(Printed or typed name and title)
hereby accept the appointment as registered agent and agre further agree to comply with the provisions of all statutes, re verformance of my duties, and I am familiar with and accept Or, if his document is being filed merely to reflect a change i he carporation has been notified in writing of this change.	e to act in this capacity. elative to the proper and complete the obligation of my position as registered agent. In the registered office address, I hereby confirm that
Signature of Registered Agent)	11-27-05 (Date)
f signing on behalf of an entity:	()
Typed or Printed Name)	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. Box 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)