

LAW OFFICES OF

KIMPTON, BURKE, WHITE & HEIDEN, P.A.

PO00000041219

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SUITE 100
CLEARWATER, FL 33761-2698
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May 31, 2000

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

RE: North Pinellas Institute for Reconstructive Surgery, Inc.
Our File No. 11,361.04.6.000

FILED
00 JUN -5 AM 10:35
TALLAHASSEE, FLORIDA
DEPT. OF STATE

Gentlemen:

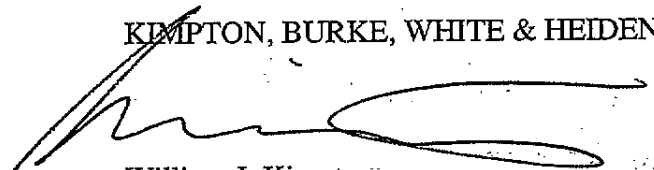
Enclosed is Statement of Change of Registered Office or Registered Agent or Both for Corporations for the captioned corporation. Please file the same in the records of your office.

Please date stamp the duplicate copy enclosed with the filing information and return in the self-addressed, stamped envelope also enclosed.

Further enclosed is our check in the amount of \$35 covering your filing fees.

Sincerely,

KIMPTON, BURKE, WHITE & HEIDEN, P.A.


William J. Kimpton

WJK/cg
Enclosures

RDA Change
6-13-00
RHS

100003277031--4
-06/05/00-01118-006
*****35.00 *****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.

- 1a. The name of the corporation is: North Pinellas Institute for Reconstructive Surgery, Inc.
- 1b. The mailing address of the corporation is: 220 Alternate 19 North, Palm Harbor, Florida 34683
- 1c. Date of incorporation: April 24, 2000 Document number: P00000041219
2. The name and address of the current registered agent and office:

Robert C. Burke, Jr.
28059 U. S. Highway 19 North, Suite 100
Clearwater, Florida 33761

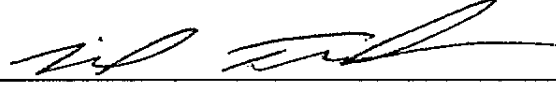
3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

Noel S. Tenenbaum
220 Alternate 19 North
Palm Harbor, Florida 34683

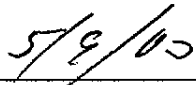
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TALLAHASSEE, FLORIDA

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.



(Signature of an officer, chairman or vice chairman
of the board)

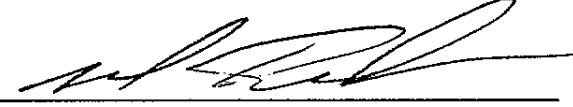


(Date)

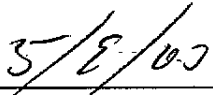
Noel S. Tenenbaum

(Printed or typed named and title)

Having being 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.



(Signature of Registered Agent)



(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)