00000077/34



ACCOUNT NO. : 07210000032

REFERENCE: 750449

7304648

AUTHORIZATION : 7

COST LIMIT :

ORDER DATE: January 18, 2002

ORDER TIME_: 9:47 AM

ORDER NO. : 750449-085

CUSTOMER NO: 7304648

100004852921--7

CUSTOMER: Ms. Jacquelyn O. Ayers

Health Centers

421 W. College Street

Murfreesboro, TN 37130

CHANGE OF AGENT

NAME:

THE HEALTH CENTER OF ORLANDO,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY _____PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon -- EXT# 1145

EXAMINER:

C. Coulliette FEB 0 4 2002

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

the State of Florida. 1. The name of the	•		ered agent, or both, in
1. The manie of mo	corporation: THE HEALTH CENT	ER OF ORLANDO, INC.	
	corporation:		
2. The mailing addr	ess of the corporation: P.O. Bo	ox 618246, Orlando, FL 3286	51-8246
3. Date of incorpor	ation/qualification: 08/15/2000	Document number	r: <u>P00000077134</u>
4. The name and ad	dress of the current registered ag	gent and office:	
Corp	poration Company of Miami		02 SECU TALL
201	S. Biscayne Blvd., 1500 Miar	mi Center	AFIA TEB
Mia	mi, FL 33131		388 7 F
5. The name and ad	dress of the new registered agent (P. O. Box No	t (if changed) and/or registered of Acceptable)	office (if changed):
Corr	poration Service Company		JE JDA
1201	Hays Street	-	<u>.</u>
Tall	lahassee, Florida 32301		
The street address o	of its registered office and the st will be identical.	reet address of the business of	ffice of its registered
Such change was at authorized by the b	uthorized by resolution duly addord.	opted by its board of directors	or by an officer so
Saccual	officer, chairman of the	1/2	28/02
Jacquely	n Ayers, Asst Se (Printed or typed name and title)	ecretary	·
l turtner agree to co	l as registered agent and to acc by accept the appointment as re omply with the provisions of all duties, and I am familiar with a	statutes relative to the proper	r and complete
C Hay	114	1/2/2	**************************************
(Signat	ure of Registered Agent)	(Daté)	
f signing on behalf of a	nn entity:		
Christine J. Gate	s I or Printed Name)	Asst. V.P. (Capacity)	<u></u>

CR2E045(9/00)