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CARVER, DARDEN, KORETZKY, TESSIER, FINN, BLOSSMAN & AREAUX LLC NEW ORLEANS PENSACOLA		_	
\ <sub>\\\\</sub> '	1300 WEST MAIN STREET PENSACOLA, FLORIDA 3250		:
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PICK-UP	WAIT	MAIL	
(Bi	usiness Entity Name)	<u> </u>	
,	. ,		
(Do	ocument Number)		<del>-</del>
Certified Copies	Certificates of	Status	_
Special Instructions to	Filing Officer:	-	
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	Office Lise Only		



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DIVISION GE CORPORATION OT SEP -4 PH 2: 31

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

statement of che	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: PHC - MT, Inc.
2. The principal	office address: 909 Gardengate Circle, Pensacola, FL 32504
3. The mailing a	address (if different): 909 Gardengate Circle, Pensacola, FL, 32504
4. Date of incor	poration/qualification: 12/26/2000 Document number: P00000116956
	d street address of the current registered agent and registered office on file with the rtment of State:
	Linda A. Hoffman
	Emmanuel, Sheppard & Condon, 30 S. Spring Street
	Pensacola, FL 32502
6. The name and (if changed):	Pensacola, FL 32502  is street address of the new registered agent (if changed) and /or registered office  Linda A. Hoffman
	1300 W. Main Street  (P.O. Box NOT acceptable)  Pensacola, FL 32501
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
BY:	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
Thereby accept I further agree to I fury duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity.  o comply with the provisions of all statutes relative to the proper and complete performance of am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Sindy Sig	Matter 8 22 2007  (Date)
f signing on bel	half of an entity:
Linda A. Hoffn	nan
(T	yped 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)