Polocolo5855 Requester's Name Address

From: SONDRA MCCRORY (850)432-0650 DELTA HEALTH GROUP, INC 2 N. PALAFOX STREET

PENSACOLA, FL, 32501

Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| (Corporation Name) | (Document #) |
|---|--|
| | |
| 2(Corporation Name) | (Document #) |
| 3(Corporation Name) | (Document #) |
| | (Document #) |
| 4(Corporation Name) | (Document #) |
| ☐ Walk in ☐ Pick up time _ | Certified Copy |
| ☐ Mail out ☐ Will wait | Photocopy |
| NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS | AMENDMENTS -07/05/0201051002 Amendment *****35.00 *****35.00 Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Foreign |
| ☐ Annual Report ☐ Fictitious Name | Foreign Limited Partnership Reinstatement Trademark Other |

CR2E031(7/97)

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

| the undersign | ned corporation organized u | nder the laws of the S | | r.= |
|-------------------------------|---|--|--|---------------------|
| the State of F | ollowing statement in order lorida. of the corporation : TFBS C | , | red office or registered agent, or | both, in |
| · | | والمرابع المرابع المرابع المرابع المرابع | | |
| 2. The mailing | g address of the corporation | 2 North Palafox Stre | et, Pensacola, Florida, 32501 | <u> </u> |
| 3. Date of inc | corporation/qualification: 11 | /1/2001 | Doçument number: P010001058 | 855 |
| 4. The name a | and address of the current reg | gistered agent and off | ice: | |
| | Scott J. Bell | | | |
| | 2 N. Palafox Street | | 4 | omero y Sapa |
| | Pensacola, FL 32501 | | | . - |
| 5. The name a | nd address of the new regist | ered agent (if change O. Box Not Acceptab | d) and/or registered office (if challe) | nged): |
| | Sondra McCrory | | , | |
| | 2 North Palafox Street | | | |
| | Pensacola, Florida 3250 | 1 | | -, ::= = |
| The street add agent, as chan | ress of its registered office ged, will be identical. | and the street addres | s of the business office of its reg | istered |
| | was authorized by resolution | | board of directors or by an offic | |
| (Signatur | e of an officer, chairman or vice chair | rman of the board) | 6/11/02 | |
| Scott J. Bell | | man or me boatty | (Date) | |
| Scott J. Bell | (Printed or typed name and ti | tle) | | - |
| I further agree | nereby accept the appointment to comply with the provision of my duties, and I am famil | ieni as registerea ag ons of all statutes vei | of process for the above stated ent and agree to act in this capa ative to the proper and complet he obligation of my position as | ecity. e |
| _ 5m | dia Maria | \ A | 6/11/02 PA | ç 02 |
| (| Signature of Registered Agent) | Y | (Date) | |
| If signing on beha | - | | Corporate Administrator | TAG 5 |
| | (Typed or Printed Name) | | (Capacity) | , - = [|
| | * * * 17 | LING FEE: \$35.00 | TC | ; = |
| CR2E045(9/00) | FI | | RID/ | <u>5</u> |
| • • | DIVISION OF CORPORATIONS | P.O. Box 6327 | TALLAHASSEE, FL 32314 | |