# 00/0588. Requester's Name From: SONDRA MCCRORY (850)432-0650 DELTA HEALTH GROUP, INC. 2 N. PALAFOX STREET PENSACOLA, FL, 32501 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) ☐ Walk in Pick up time Certified Copy Mail out ■ Will wait ☐ Photocopy Certificate of Status 400006223124--2 -07/05/02--01051--015 \*\*\*\*\*35.00 \*\*\*\*\*35.00 **NEW FILINGS** <u>AMENDMENTS</u> Profit Amendment

- Not for Profit
- Limited Liability Domestication
- Other

### OTHER FILINGS

☐ Annual Report ☐ Fictitious Name

- Resignation of R.A., Officer/Director
- Change of Registered Agent Dissolution/Withdrawal
- Merger

## REGISTRATION/OUALIFICAT

- Foreign Limited Partnership
- Reinstatement
- Trademark

Other

Examiner's Initial

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

the undersign	the provisions of sections 607.0502, 617.0502, ned corporation organized under the laws of the l following statement in order to change its registe	State of Florida	Ŧ
the State of F	lorida.		
1. The name (	of the corporation : Isis Sarasota, Inc.	<u> </u>	-
2. The mailing	g address of the corporation : 2 North Palafox Stre	eet, Pensacola, Florida, 32501	jaan ing Pangan
3. Date of inc	corporation/qualification: 11/1/2001	Document number: P01000105887	· .
4. The name a	and address of the current registered agent and of	fice:	= .
	Scott J. Bell		
	2 North Palafox Street	<del> </del>	
	Pensacola, Florida 32501		
5. The name a	and address of the new registered agent (if change (P. O. Box Not Acceptal		_
	Sondra McCrory		
	2 North Palafox Street		-241
	Pensacola, Florida 32501		
The street add agent, as chan	dress of its registered office and the street addres	as of the business office of its registered	glan va
	was authorized by resolution duly adopted by its	board of directors or by an officer so	
(Signatur	re of an officer, chairman or vice chairman of the board)	6/11/02 (Date)	
Scott J. Bell	,	(Date)	
Ocoli J. Beil	(Printed or typed name and title)	<del></del>	
forporation, 1 I further agree	named as registered agent and to accept service hereby accept the appointment as registered ag e to comply with the provisions of all statutes re of my duties, and I am familiar with and accept t ent.	Tent and agree to act in this capacity.  Intive to the proper and complete	
<u> Son</u>	(Signature of Registered Agent)	6/11/02 (Date)	
f signing on beha Sondra Mc		Corporate Administrator	
	(Typed or Printed Name)	(Capacity)	- · · · -
	* * * FILING FEE: \$35.00	5 AM SEE, F	

CR2E045(9/00)
DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314

AMIL: 51 OF STATE FLORIDA