

P01000116563

TO: Amendment Section
Division of Corporations

SUBJECT: MEDSOURCE STAFFING, INC.
(Name of corporation)

DOCUMENT NUMBER: P01000116563

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Danielle Austin
(Name of person)

Medsource Staffing, Inc.
(Name of firm/company)

8051 North Davis Highway
(Address)

Pensacola, FL 32514
(City/state and zip code)

For further information concerning this matter, please call:

Danielle Austin at (850) 479-8096
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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*****35.00 *****35.00

FILED
02 AUG 29 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P01000116563
RACM 272
8-29-02

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, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MEDSOURCE STAFFING, INC.
2. The principal office address: 8051 North Davis Hwy.
Pensacola, FL 32514
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/07/2001 Document number: P01000116563

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Larry Burgess

8048 Delta Drive

Milton, FL 32583

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Danielle Austin

8051 North Davis Hwy.

(P.O. Box or personal mailbox NOT acceptable)

Pensacola, FL 32514

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, or the corporation has been notified in writing of the change.

Danielle Austin

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

Danielle Austin, President

(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Danielle Austin

(Signature of Registered Agent)

8/19/02

(Date)

If signing on behalf of an entity:

Danielle Austin

(Typed or Printed Name)

President

(Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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