P02000035408

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TRANSMITTAL LETTER

SUBJECT: ARCADIA GENERAL INTERNAL MEDICINE INC. (Name of corporation)		
DOCUMENT NUMBER: \$02000035408		
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:		
MAHENDRA PATEL (Name of person)		
ARCADIA GENERAL INTERNAL MEDICINE INC.		
(Name of firm/company)		
201 E GIBSON ST (Address)		
(Address)		
ARCADIA FL 34266		
(City/state and zip code)		
For further information concerning this matter, please call:		
MAHENDRA PATEL at (863) 494-7100 (Name of person) at (Area code & daytime telephone number)		
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399		

TO:

Amendment Section Division of Corporations

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
in order to change its registered office or registered agent, or both, in the State
of Florida.
1. The name of the corporation: ARCADIA GENERAL INTERNAL HEDICINE INC.
2. The principal office address: 201 E GIBSON ST
ARCADIA FL 34266
3. The mailing address (if different):
4. Date of incorporation/qualification: 04/01/02 Document number: P020003540
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:
Florida Filing & Search Sewices the
Tellahassee FL 32303
Tollahassee FL 32303
6. The name and street address of the new registered agent (if changed) and /or registered office (if
1 5
Changed): MAHENDRA PATEL ARCADIA GENERAL INTERNAL SOL & GIBSON ST MEDICINE INC
ARCADIA FL 34266
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.
MAHENDRA PATEL, PRESIDENT (Signature of an officer, Chairman or vice Chairman of the board) (Printed or typed name and title)
(Signature of an officer, chairman or vice chairman of the board) (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.
M. A. 1 - 05/09/03 FO 0
(Signature of Registered Agent) (Date)
If signing on behalf of an entity: MALEHONA DATEL DRESIDENT STORY DRESIDENT
(Canacity)
* * * FILING FEE: \$35.00 * * *
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TAILAHASSEE, FL 32314