

PO2000053240

TRANSMITTAL LETTER

FILED
02 JUN 28 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 13, 2002

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
(850) 487-6052

SUBJECT: CHANGE OF REGISTERED AGENT FOR MED-COST CONTROL, INC.

Enclosed are an original and one (1) copy of **STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OT BOTH FOR CORPORATION** for the above stated Florida profit corporation and a check for:

☒ \$35.00 Filing Fee made payable to the Florida Department of State.

FROM:

Caren Tondo

5944 Coral Ridge Drive #305

Coral Springs, FL 33076

954-345-2254

Daytime Telephone number

400006100514--2
-06/28/02--01035--005
*****35.00 *****35.00

PS 7/3/02
RA/NO

**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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : MED-COST CONTROL, INC.
2. The mailing address of the corporation : 5944 Coral Ridge Drive #305
Coral Springs, FL 33076
3. Date of incorporation/qualification: 5/14/02 Document number: PO2 000053240
4. The name and address of the current registered agent and office:

CSC

1201 Hays Street Suite 232

Tallahassee, FL 32301

5. The name and address of the new registered agent (if changed) and/or registered officer (if changed):
(P. O. Box Not Acceptable)

Caren Tondo

5944 Coral Ridge Drive #305

Coral Springs, FL 33076

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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.

Caren E. Tondo, Pres./Director
(Signature of an officer, chairman or vice chairman of the board)

6/18/02
(Date)

Caren Tondo, President/Director
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Caren E. Tondo
(Signature of Registered Agent)

6/18/02
(Date)

If signing on behalf of an entity:

Caren Tondo

(Typed or Printed Name)

(Capacity)

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