

PO2000124630

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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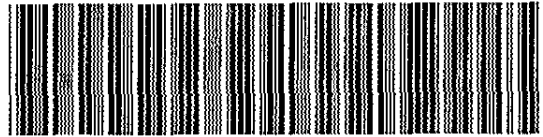
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

C. Coulliette MAR 20 2003



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 945825 128640A

AUTHORIZATION :

Patricia P. P. P.

COST LIMIT : \$ 35.00

ORDER DATE : February 26, 2003

ORDER TIME : 4:38 PM

ORDER NO. : 945825-045

CUSTOMER NO: 128640A

CUSTOMER: Pamela Richardson, Paralegal
Andrx Corporation
4955 Orange Drive

Davie, FL 33314

CHANGE OF AGENT

NAME: ANDRX PHARMACEUTICALS (NC),
INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT# 1140

EXAMINER: _____

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: ANDRX PHARMACEUTICALS (NC), INC.

2. The principal office address: 2915 Weston Road, Weston, FL 33331

3. The mailing address (if different): 2915 Weston Road, Weston, FL 33331

4. Date of incorporation/qualification: November 21, 2002 Document number: P02000124630

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

CorpDirect Agents, Inc.

103 N. Meridian Street, Lower Level

Tallahassee, FL 32301

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

Corporation Service Company

1201 Hays Street

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

Tallahassee, FL 32301

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.

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

Scott Lodin, Director

(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.

Cynthia L. Harris
(Signature of Registered Agent)

3/19/03
(Date)

If signing on behalf of an entity:

**Cynthia L. Harris
as its agent**

(Typed or Printed Name)

(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