Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 120000000195 Phone : (850)521-1000 Fax Number : (850)558-1515

Please give original submission date as file date.

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT CHANGE MPTC HOLDINGS, INC.

Certificate of Status	0
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Corporate Filing Menu

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11/14/2011

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COVER LETTER

Division of	t Section Corporations		
SÜBJECT:	MPTC Hold	lings, Inc.	
	Name of	Corporation	·
DOCUMENT NUN	ABER: PO	3000109819	
The enclosed Statem	ent of Change of Registered Offi	ice/Agent and fee are subm	itted for filing.
Please return all con	respondence concerning this matt	er to the following:	
_	Jonatha	an Napier	
	Name of C	ontact Person	·
		Medical	
-	Firm/C	Company	
-	1505 LBJ Fred	eway, Suite 600 dress	
	Au	01.622	
	Farmers Brai	ich TX 75234	
	City/State a	nch, TX 75234 and Zip Code	
	cosmed licensing	g@ccsmed.com	
Ē	inail address: (to be used for	future annual report noti	fication)
For further informati	on concerning this matter; please	call:	
Jo	onathan Napier	at (972)	628-2158
	of Contact Person	at (972) Area Code & Dayti	me Telephone Number
Enclosed is a \$35,00	check made payable to the Depar	iment of State.	
	Mailing Address:	Street Address	ا د بید
	Amendment Section Division of Corporations	Amendment Son of Co	
•	P.O. Box 6327	Clifton Buildii	
	Tallahassee, FL 32314		e Center Circle
		TallahasseeE	

CR2E045 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OF REGISTERED AGENT OF 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
1. The name of the corporation: MPTC Holdings, Inc.
2. The principal office address: 14255 49th Street North, Suite 301, Clearwater, Florida 33762
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/06/2003 Document number: P03000109819
5. The name and street address of the current registered agent and registered office on file with the Eforida Department of State: (If resigned, enter resigned)
Natarsha D. Nesbitt
14255 49th Street North, Suite 301
Clearwater, Florida 33762
6. The name and street address of the new registered agent (if changed) and for registered office (if changed):
Corporation Service Company
1201 Hays Street
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 hoard 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 officet of director Printed of typed aging 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 stantes 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.
Staphanie Milnes 11/14/11 Stanature of Registered Agent
If signing on behalf of an entity:
Stephanie Milnes Typid or Printed Name
* * * FILING FEE: \$35:00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 323-14*
CR2E045 (8/05)