

POS0000 25731

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

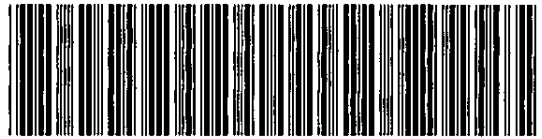
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/31/08--01024--004 **10.00

12/09/08--01019--008 **100.00

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08 DEC 31 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RACHA
1/5/09



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 17, 2008

TERRY SCAGLIONE
REGISTERED AGENTS LEGAL SERVICES LLC
1220 N. MARKET STREET, SUITE 806
WILMINGTON, DE 19801

SUBJECT: RXPRT, INC.
Ref. Number: P05000025731

We have received your document for RXPRT, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

ONLY \$25.00 WAS RECEIVED FOR THIS FILING. THE FILING FEE TO CHANGE THE REGISTERED AGENT FOR A CORPORATION IS \$35.00. THERE IS A BALANCE DUE OF \$10.00.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 008A00060782

RECEIVED

2008 DEC 24 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



December 8, 2008

Registered Agents
Legal Services, LLC

1220 N. Market Street
Suite 806
Wilmington DE 19801
(302) 427-6970
(800) 400-6650
(302) 421-5753 [fax]
info@IncLegal.com [email]
www.IncLegal.com

Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Rxpert Inc.; Rxpert #1 LLC, Rxpert #3 LLC, Advanced Medical Solutions, LLC

Dear Sir/Madam,

Enclosed you will the applications for Change of Registered Agent and our check in the amount of \$100.00 to cover your filing fees. Please fax and mail the filed evidence to the following:

Fax : 302-421-5753

Registered Agents Legal Services, LLC
Attn: Terry Scaglione
1220 N. Market Street, Suite 806
Wilmington, DE 19801

If you have any questions, please call me at 800-400-6650. Thank you.

Sincerely,

Terry Scaglione
Incorporating Specialist

**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: Rxpert Inc.
2. The principal office address: 7272 Wurzbach Rd., Suite 901, San Antonio, TX 78240
3. The mailing address (if different): 7272 Wurzbach Rd., Suite 901, San Antonio, TX 78240
4. Date of incorporation/qualification: 02/17/2005 Document number: P05000025731
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Robertson, Andrew A
4239 Sunbeam Road, Suite 1
Jacksonville, FL 32257

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

Registered Agents Legal Services, LLC
155 Office Plaza Drive, Suite A
(P.O. Box NOT acceptable)
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

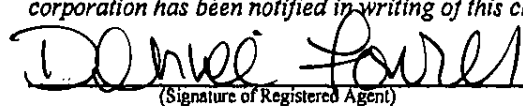
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 or director)

Ruben Flores Jr. Assit. Secretary
(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.


(Signature of Registered Agent)

12.8.08
(Date)

If signing on behalf of an entity:

Denise Fowler
(Typed 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 32314
CR2E045 (8/05)