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Office Use Only



RONALD A. CHRISTALDI (813) 221-7152 rchristaldi@slk-law.com

Bank of America Plaza 101 East Kennedy Boulevard 813.229.1660 fax Suite 2800

813.229.7600

Tampa, Florida 33602

www.slk-law.com

October 1, 2007

Division of Corporations Florida Department of State Post Office Box 6327 Tallahassee, Florida 32314

Re:

ICON PIP Billing, Inc.

Date of Incorporation: May 2, 2005 Document Number P05000064565 Change of Address of Registered Office

Dear Sir/Madam:

Enclosed is a Statement of Change of Registered Office or Registered Agent or Both for Corporations, which is submitted in order to change the address of the registered office for the above-referenced corporation. Also enclosed is Shumaker, Loop & Kendrick's Check Number 81089 payable to the Florida Department of State in the amount of \$35.00 to cover the fee for this change. Thank you for your attention to this matter.

Royald A. Christaldi

RAC/jar Enclosures (2)

cc: Christopher P. Calkin, Esq.

## 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: ICON PIP Billing, Inc.
2. The principal office address: 309 South Willow Avenue, Tampa FL 33606
3. The mailing address (if different):
4. Date of incorporation/qualification: 05/02/2005 Document number: P05000064565
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Ronald A. Christaldi
101 E. Kennedy Blvd., Suite 3400
Tampa, FL 33602
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Ronald A. Christaldi
101 E. Kennedy Blvd., Suite 2800
(P.O. Box NOT acceptable) Tampa, FL 33602
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.
CHRISTOPHER P. CALKIN, PRESIDENT
(Signature of an officer or director)  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)  (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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