Division of Corporations Public Access System

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Division of Corporations Fax Number

: (850)205-0380

: CORPORATE CREATIONS INTERNATIONAL INC. Account Name

Account Number : 110432003053 : (305)672-0686 Phone Fax Number : (305)672-9110

## REGISTERED AGENT CHANGE

CONTINUCARE CLINICS, INC.

Certificate of Status	0
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of section 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 is: Continucare Clinics, Inc.
2. The principal office address:
7200 CORPORATE CENTER DRIVE ste 600 MIAMI, FL 33126
3. The mailing address (if different):
4. Date of incorporation/qualification: 8/11/2006 Document Number: P06000105508
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  LAUREN B YOUND
2200 MUSEUM TOWER, 150 WEST FLAGLER ST
MIAMI FL 33130
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Corporate Creations Network Inc.
11380 Presperity Farms Road #221E (P.O. Box Not sccoptable)
Palm Beach Gardens FL 33410
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.
Richard Plenniger, by T. Baez as attorney-in-fact (Signature of an officer or 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.
9/5/2006
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:  Angela E. Howard  Assistant VP  Corporate Creations
( (Typed or Printed Name)
MAKE CHECKS PAYABLE TO PLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FE 32316 TI
Corporate Creations International Inc.
Data County Street
Miami Beach FL 33139
(305) 672-0686