



THE UNITED STATES  
CORPORATION  
COMPANY

# P07284

ACCOUNT NO. : 072100000032  
REFERENCE : 248604 4350891  
AUTHORIZATION : *Patricia Piziti*  
COST LIMIT : \$ 35.00

FILED  
91 FEB 21 PM 4:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : February 4, 1997

ORDER TIME : 12:19 PM

ORDER NO. : 248604-025

CUSTOMER NO: 4350891

200002084522--4

CUSTOMER: Robert Pommerville, Esq  
Beverly Enterprises, Inc.  
5111 Rogers Avenue  
Ste 40-a  
Fort Smith, AR 72919

CHANGE OF AGENT

NAME: INSTA-CARE PHARMACY SERVICES  
CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY

CONTACT PERSON: Debbie Skipper

*RA Change*  
*02/21/97*  
*DE*

Florida Department of State, Jim Smith, Secretary of State

**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, the undersigned corporation organized under the laws of the State of  
TEXAS submits the following statement in order to change its registered office  
or registered agent, or both, in the State Florida.

1a. The name of the corporation is: \_\_\_\_\_

INSTA-CARE PHARMACY SERVICES CORPORATION

1b. Date of incorporation: 8/26/85 Document number P07284

2. The name and address of the current registered agent and office:

C T CORPORATION SYSTEM

1200 SO. PINE ISLAND DRIVE PLANTATION FL 33324

3. The name and address of the new registered agent and office:  
(P.O. Box Not Acceptable)

CORPORATION SERVICE COMPANY

1201 Hays Street, Tallahassee, Florida 32301

The street address of its registered agent 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.

Holly A. Odom  
SIGNATURE

HOLLY A. ODOM  
ASST SECRETARY

Typed or printed name and title

February 14, 1997

DATE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF  
PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED  
IN THIS CERTIFICATE, 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 COM-  
plete performance of my duties, and I AM FAMILIAR WITH AND ACCEPT  
THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

CORPORATION SERVICE COMPANY  
DEBBIE SKIPPER

SIGNATURE By: Debbie Skipper  
ASST VICE PRESIDENT

DATE 2-21-97

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TALLAHASSEE, FLORIDA