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COVER LETTER

TO: Amendment Section

Division	of Corporations			
own more Ve	rssa Women's Center, P.A.			
SUBJECT: V	(Name of Corp	poration)		
DOCUMENT!	NUMBER: P08000077071			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all	correspondence concerning this matter to	the following:		
	Veronica Socas (Name of Conta	ct Person)		
	`	,		
	Verssa Women's Center, P.A.			
	(Firm/Comp	pany)		
J. 1997	36739 State Road 52 Suite 101			
(Address)				
	Dodo City El 22525			
	Dade City, FL 33525 (City/State and 2	Zip Code)		
For further infor	mation concerning this matter, please call	:		
Veronica Socas	3	at (352 · ·) 457 4433 · ·		
(Name of Contact Person)	at (352) 457 4433 (Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department of State.				
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle		
	,	Tallahassee, FL 32301		
CR2E045 (8/05)	्रत्यक्त स्टब्स्ट्राटकिस्ट्राटिस्ट्राटक्रिके	· · · · · · · · · · · · · · · · · · ·		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this hange is submitted for a corporation organized under the laws of the State of Florida	
•	der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation: Verssa Women's Center, P.A.	
2. The principal	al office address: 36739 State Road 52 Suite 101, Dade City, FL 33525	
3. The mailing a	address (if different): Same	
4. Date of incor	prporation/qualification: 08/20/2008 Document number: P08000077071	
	nd street address of the current registered agent and registered office on file with the artment of State:	
	ROY W HUNTSMAN	ON SI
	4056 NEWBERRY RD	a St
	GAINESVILLE, FL 32607 US	14 TS
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered office	VISION OF CORPORATIONS VISION OF TORPORATIONS ON SEP 15 PM 12: 94
	Veronica Socas	24
	36739 State Road 52 Suite 101	
	(P.O. Box NOT acceptable)	
	Dade City, FL 33525	
The street address changed will	lress of its registered office and the street address of the business office of its registered a ill be identical.	agent,
Such change wa authorized by the	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
(Signal	ature of an officer or diffector) VERDINICA SOCAS PRESIDE (Printed or typed name and tittle)	MT
I hereby accept I further agree of my duties, an document is bel corporation has	of the appointment as registered agent and agree to act in this capacity, eto comply with the provisions of all statutes relative to the proper and complete performend I am familiar with and accept the obligation of my position as registered agent. Or, eing filed merely to reflect a change in the registered office address, I hereby confirm the as been notified in writing of this change.	mance if this at the
<	9/10/2008	
	Signature of Registered Agent) (Dalc)	
If signing on be	pehalf of an entity:	
	(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)