

P31538



ACCOUNT NO. : 072100000032

REFERENCE : 023712 4346117

AUTHORIZATION : *Patricia Pizito*

COST LIMIT : \$ 35.00

ORDER DATE : November 5, 1998

ORDER TIME : 9:55 AM

ORDER NO. : 023712-505

CUSTOMER NO: 4346117

CUSTOMER: Anna Norcia, Corp Paralegal
Cobe Laboratories, Inc
1201 Oak Street

100002712731--4

Lakewood, CO 80215-4498

CHANGE OF AGENT

NAME: AMERICAN OUTPATIENT SERVICES CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Christopher Smith

FILED
98 DEC 15 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
98 DEC 15 AM 10:41

Joe 12/15

Florida Department of State, Sandra B. Mortham, Secretary of State

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

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 Delaware submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: American Outpatient Services Corporation

2. The mailing address of the corporation is: 1185 Oak Street Lakewood, CO 80215

3. Date of incorporation/qualification: October 24, 1990 Document number: 954046814

4. The name and address of the current registered agent and office: CT Corporation System 1200 South Pine Island Road Plantation, FL 33324

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable) Corporation Service Company 1201 Hays Street Tallahassee, FL 32301

FILED 98 DEC 15 PM 2:50 SECRETARY OF STATE 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.

[Signature] 12/2/98 (Signature of an officer, chairman or vice chairman of the board) (Date)

Lynn Meyer, Assistant Secretary (Printed or typed name and title) (Date)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Corporation Service Company [Signature] 12-14-98 (Signature of Registered Agent) (Date)

If signing on behalf of an entity: Karen E. Wehner Assistant Vice President (Typed or Printed Name) (Capacity)