

P 36594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATION AND STAFF
TALLAHASSEE, FLORIDA

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CHARLES BACLET
AND
ASSOCIATES, INC.



CBA is an affiliate of National Registered Agents, Inc.

VIA U.S. MAIL

May 30, 2003

Division of Corporations
Florida Department of State
P. O. Box 6327
Tallahassee FL 32314

RE: AMN Healthcare, Inc.

Dear Sir/Madam:

Enclosed for filing, please find the appropriate document required by your state for changing the registered agent to National Registered Agents, Inc. Also, please find a check in the amount of \$35.00 to cover your filing fees.

Please process as soon as possible and return a filed stamped copy in the enclosed self-addressed stamped envelope.

If you have any questions or if I can help you in any way possible, please call.

Very truly yours,

CHARLES BACLET AND ASSOCIATES, INC.

Terry Tarwater

Enclosures

**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 Nevada in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: AMN HEALTHCARE, INC.
2. The principal office address: 12235 El Camino Real, Suite 200, San Diego, CA 92130
3. The mailing address (if different): _____
4. Date of incorporation/qualification: December 11, 1991 Document number: P36594
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
- CT Corporation System
- 1200 South Pine Island Road
- Plantation, FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- NRAI Services, Inc.
- 526 E. Park Avenue
- (P.O. Box or personal mailbox NOT acceptable)
- Tallahassee, FL 32301

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.

5/19/03 Denise L. Jackson, Vice President
(Signature of an officer, chairman or vice chairman of the board) (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.

[Signature] May 30, 2003
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

By: Charles Baclet Vice President
(Typed or Printed Name) (Capacity)

NRAI Services, Inc.

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

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