

P39753

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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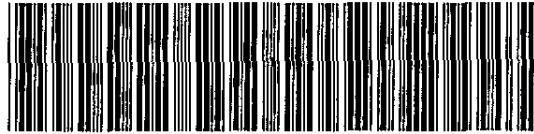
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 JUN 16 PM 12:40  
DIVISION OF CORPORATIONS

*FA. Chs*

*G. O'Connell* JUN 16 2004



CORPORATION SERVICE COMPANY'

ACCOUNT NO. : 072100000032

REFERENCE : 733049 5046129

AUTHORIZATION *Patricia Pignato*

COST LIMIT : \$ 35.00

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ORDER DATE : June 9, 2004

ORDER TIME : 10:22 AM

ORDER NO. : 733049-450

CUSTOMER NO: 5046129

CUSTOMER: Sharon Pedersen  
Henry Schein, Inc.  
135 Duryea Road

Melville, NY 11747  
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CHANGE OF AGENT

NAME: MICRO BIO-MEDICS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward

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

1. The name of the corporation: MICRO BIO-MEDICS, INC.
2. The principal office address: \_\_\_\_\_  
846 Pelham Parkway, Pelham Manor, NY 10803
3. The mailing address (if different): \_\_\_\_\_  
P.O. Box 2880, Greenville, SC 29602
4. Date of incorporation/qualification: 07/23/1992 Document number: P39753
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Blumberg Excelsior Corporate Services Inc.

4435 Old Winter Garden Road

Orlando, FL 32802

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

(P.O. Box or personal mailbox NOT acceptable)

Tallahassee, FL 32301

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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.

Maureen Cullen  
(Signature of an officer or director)

Maureen Cullen, Attorney in Fact  
(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.*

Corporation Service Company

By: Sylvia Queppet  
(Signature of Registered Agent)

June 7, 2004

(Date)

If signing on behalf of an entity:

Sylvia Queppet

(Typed or Printed Name)

Asst. Vice President

(Capacity)

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

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