## P93000069989

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REFERENCE : 216396 4358473 AUTHORIZATION : lat COST LIMIT : \$ \$35.00 ORDER DATE: February 21, 2005 ORDER TIME : 10:48 AM ORDER NO. : 216396-880 CUSTOMER NO: 4358473 CUSTOMER: Lisa C. Holahan Genesis Healthcare Corporation 101 E. State Street Kennett Square, PA 19348 CHANGE OF AGENT NAME: EIDOS, INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX PLAIN STAMPED COPY CONTACT PERSON: Denise Mick -- EXT# 2950 EXAMINER: \_\_\_\_

ACCOUNT NO. : 072100000032

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

Pursuant to the provisions of sections 607.0502, 617.0502, 6 statement of change is submitted for a corporation organized in order to change its registered office or registered	d under the laws of the State of Florida
	i ageni, or ooin, in the state of Ftortaa.
1. The name of the corporation: EIDOS, INC.	
2. The principal office address: 101 East State Stree	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/04/1993	Document number: P93000069989
5. The name and street address of the current registered agen Florida Department of State:	t and registered office on file with the
C T Corporation System	OS F SECR ALLA
1200 South Pine Island Road	THE ASSET
Plantation, FL 33324	STOP P
1200 South Pine Island Road  Plantation, FL 33324  6. The name and street address of the new registered agent (i (if changed):  Corporation Service Company  1201 Hays Street  (P.O. Box NOT acceptable)	f changed) and /or registered office
Corporation Service Company	
1201 Hays Street	
(P.O. Box NOT acceptable)	
Tallahassee, FL 32301	
The street address of its registered office and the street address changed will be identical.	dress of the business office of its registered agent,
Such change was authorized by resolution duly adopted by authorized by the board, or the corporation has been notified.	y its board of directors or by an officer so ed in writing of the change.
I harren Cull	Maureen Cullen, Attorney in Fact
(Signature of an officer or director)	(Printed or typed name and title)
I hereby accept the appointment as registered agent and a l further agree to comply with the provisions of all statute, of my duties, and I am familiar with and accept the obliga document is being filed merely to reflect a change in the recorporation has been notified in writing of this change.  © orporation Service Company	s relative to the proper and complete perjormance tion of mv position as registered agent. Or. if this
$\mathcal{M} = \mathcal{M} = \mathcal{M}$	February 21, 2005
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
Jacqueline M. Giles, Asst. Vice President	
(Typed or Printed Name)	

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