

ACCOUNT NO. : 07210000032

REFERENCE:

029819

5028257

AUTHORIZATION OF

COST LIMIT

\$ 35.00

ORDER DATE: November 12, 1998

ORDER TIME : 9:15 AM

ORDER NO. : 029819

000002687730--8

CUSTOMER NO: 5028257

CUSTOMER:

Ms. Michelle H. Ancosky

Magellan Health Services, Inc.

Magellan Health Serving 3414 Peachtree Rd.,
Suite 1400
Atlanta, GA 30326

CHANGE OF AGE
NAME: PROPSYCH, INC. 3414 Peachtree Rd., N.e.

Atlanta, GA 30326

CHANGE OF AGENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

## 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 t	
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: PROPSYCH, INC.	
2. The mailing address of the corporation is:	m: Michelle Ancosty
P.O. Box 209 Macon,	
3. Date of incorporation/qualification: January 10,	1994 Document number: P9400001975
4. The name and address of the current registered agent	and office:
CT Corporation System	TASS T
1200 South Pine Island Road	量
Plantation, FL 33324	200 P. E.D.
5. The name and address of the new registered agent an	d office: (P. O. Box Not Acceptable)
Corporation Service Company	100 A
1201 Hays Street	DA C
Tallahassee, FL 32301	-
The street address of its registered office and the streagent, as changed, will be identical.	et address of the business office of its registered
Such change was authorized by resolution duly adop authorized by the board.	ted by its board of directors or by an officer so
(Signature of an officer, chairman or vice chairman of the box	ard) (Date)
CHARLOTTE A. SANFORD, Vice President	
(Printed or typed name and title)	(D-41)
Having been named as registered agent and to accept corporation, I hereby accept the appointment as registered agree to comply with the provisions of all superformance of my duties, and I am familiar with an registered agent.	Stered agent and agree to act in this capacity.  Intuiting the proper and complete
Corporation Service Company	Loga Illistar
(Signature of Registered Agent)	(Daje)
If signing on behalf of an entity:	ı
KAREN B ROZAR	Assistant Vice President
(Typed or Printed Name)	(Capacity)

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