

P940000

14474

Requester's Name

CORAL SPRINGS ORTHOPEDICS
Jeffrey T. Haimes, M.D., F.A.A.O.S.
1710 UNIVERSITY DRIVE
CORAL SPRINGS, FLORIDA 33071

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-02/13/02--01047--002
*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)

2. _____ (Corporation Name) _____ (Document #)

3. _____ (Corporation Name) _____ (Document #)

4. _____ (Corporation Name) _____ (Document #)

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NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

NR

2/15/02

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 Florida 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 : Coral Springs Orthopedics, Inc.
2. The mailing address of the corporation : 1710 University Dr., Suite 101
Coral Springs, FL 33071
3. Date of incorporation/qualification: 2/22/94 Document number: P94-008014474

4. The name and address of the current registered agent and office:

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)

Jeffrey T. Haimes, M.D.

1710 University Dr.

Coral Springs, FL 33071

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.

Jeffrey T. Haimes, M.D.
(Signature of an officer, chairman or vice chairman of the board)

2/1/02
(Date)

Jeffrey T. Haimes, M.D. President/CEO
(Printed or typed name and title)

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.

Jeffrey T. Haimes, M.D.
(Signature of Registered Agent)

2/1/02
(Date)

If signing on behalf of an entity:

Jeffrey T. Haimes, M.D.
(Typed or Printed Name)

President/CEO
(Capacity)

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