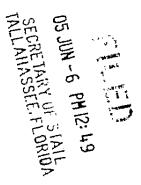
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: FEMNELL GROUP HEALTH, INC. (Name of corporation)
DOCUMENT NUMBER: 194 000043356
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Francisco Llon (Name of contact person)
Firm/Company)
3225 Aviation Avenue, Suite 700 (Address)
MIAMI, FL 33133 (City/state and zip code)
For further information concerning this matter, please call:
(Name of contact person) at (305) 273-464 (Name of contact person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

statement of change is submitted for a corporation organized under the laws of the State of Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: FEMWELL GROUP HEALTH, INC.
2. The principal office address: 3225 Aylation Avenue, Suite 700
Coconut blove, FL 33133
3. The mailing address (if different): (SAME)
4. Date of incorporation/qualification: 6/9/1994 Document number: 894000043356
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Francisco J. Leon Fig E
6351 SW 72 Street
South MIAMI, FL 33143
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Francisco J. Leon
(P.O. Box NOT acceptable)
Coconut Glove, FL 33133
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 comparation has been notified in writing of the change.
My Companies of the Market of the Company of the Co
I hereby accept the appointment as registered agent and agree to but thing 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 of Registered Agent) (Date)
If signing on behalf of an entity.
Francis 7. less
(Typed or Printed Name)

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