006259

Requester's Name

TASSONE & ELER

A Partnership of Professional Associations 1833 Atlantic Boulevard Jacksonville, FL. 32207

City/State/Zip

Phone #

100005153871--7 -03/25/02--01063--001 *****455.00 ******35.00

Office Use Only

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

(Corporation Name)	(Document #)	<u> </u>
2. (Corporation Name)	(Document #)	
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4(Corporation Name)	(Document #)	
☐ Walk in ☐ Pick up time	Certified Copy	
☐ Mail out ☐ Will wait	Photocopy Certificate of St	atus
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	SECRETARY OF STATE NS DIVISION OF CORPORATIONS 02 MAR 25 AM 8: 43
OTHER FILINGS	REGISTRATION/QUALIFICATION	
☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other RAROCV	anz 10
CR2E031(7/97)	Examiner's Initia	113 7 1 1 1 1 1 1

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

(Signature of Registered Agent) If signing on behalf of an entity: Frank lassene Registered Agent Registered Agent	_	provisions of sections				Statutes,
the State of Florida. 1. The name of the corporation: MEDICAL PARTNERS SURGERY CENTER, INC. 2. The mailing address of the corporation: 1802 Largo Road Jacksonville, F1 32207 3. Date of incorporation/qualification: 8/14/95 Document number: P95000062593 4. The name and address of the current registered agent and office: Brett J. Lewis 1802 Largo Road Jacksonville, F1 32207 5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable) Frank Tassone, Esquire 1833 Atlantic Boulevard Jacksonville, F1 32207 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. (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 dutties, and I am familiar with and accept the obligation of my position as registered agent. 3 3 3 3 3 3 3 3 3 3	•		_	•		hoth in
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* * * FILING FEE: \$35.00 * * *