96000019245 **Document Number Only** CT Corporation System Requestor's Name 660 East Jefferson Street Address 32301 (850)222-1092 Tallahassee, Phone City State ******35.00 *****35.00 CORPORATION(S) NAME Baptist/ST. Vincent'S Internated () Profit () Merger () Amendment () NonProfit () Mark () Dissolution/Withdrawal () Foreign () Other ucc Filing () Annual Report () Limited Partnership Change of R.A. () Reservation () Reinstatement () Photo Copies لت () Certified Copy () Call if Problem () Call When Ready ¥ặ Pick Up ∽ () Will Wait Walk in Mail Out Name Availability Please Return Extra Copies Document File Stamped To: Examiner Updater Jeffrey Butterfield Verifier

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CR2E031 (1-89)

Acknowledgment

W.P. Verifier

Florida Department of State, Sandra B. Mortham, Secretary of State

· 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 ofFlorida
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: Raptist/St. Vincent's Integrated Delivery
Organization, Inc., d/b/a Mission:Health
2. The mailing address of the corporation is: 720 Gilmore Street, Suite 600
Jacksonville, Florida 32204
3. Date of incorporation/qualification: 3/1/96 Document number: P96000019245 4. The name and address of the current registered agent and office:
Harvey Granger, Esquire
1301 Riverplace Blvd., Suite 1700
5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)
CT Corporation Systems
1200 South Pine Island Road
Plantation, Florida 33324
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.
1/1/ News 6/10/99
(Signature of an officer, chairman or vice chairman of the board) (Date)
THEK P. CREWOR MD President
(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.
Gignature of Registered Agent) CT CORPORATION SYSTEM BABERA A. BURKE (Signature of Registered Agent) CDate (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

FILING FEE: \$35.00

CR2E045(1/95)