P96000040194

CT CORPORATION SYSTEM

815 Superior Avenue NF Cleveland OH 44114 Tel 216 621 4270 Fa+ 216 621 4059 April 28, 1997

Secretary of State Corporate Records Bureau Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

000002171080---1 -05/08/97--01053--007 *****35.00 *****35.00

Re: Physical, Occupational, & Speech Therapy, Inc. Order #: 854992

Ladies/Gentlemen:

We enclose for filing Statement of Change of Registered Office/Agent on behalf of this corporation, together with funds in payment of the required fees. This document should be filed upon receipt.

Evidence of the filing should be returned to this office.

If you have any questions or if for any reason the filing cannot be effected promptly, please notify this office of the details by calling our toll-free number: 800-221-0556.

Very truly yours,

Joyce Donahue

Sr. Customer Specialist

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jd Enclosure(s)

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Special Instructions: Self addressed return envelope enclosed for your convenience.

R.A./Rig.cff. Charge



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 15, 1997

JOYCE DONAHUE CT CORPORATION SYSTEM 815 SUPERIOR AVENUE, NE CLEVELAND, OH 44114

SUBJECT: PHYSICAL, OCCUPATIONAL, & SPEECH THERAPY, INC.

Ref. Number: P96000040194

We have received your document for PHYSICAL, OCCUPATIONAL, & SPEECH THERAPY, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Vickie Whitfield Corporate Specialist

Letter Number: 897A00026166

Florida Department of State, Jim Smith, 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 of submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. Physical, Occupational, & Speech Therapy, Inc. 1a. The name of the corporation is:---5/6/96 1b. Date of incorporation P96000040194 Document number 2. The name and address of the current registered agent and office: Mark L. Taylor 3839 County Road 218 East, Middleburg, Florida 32068 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) C T CORPORATION SYSTEM c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation, Florida 33324 The street address of its registered agent 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. R. Jeffrey Bixler, Vice President C/SIGNATURE Typed or printed name and title 4/23/97 DATE HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 COM-

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

PLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT

Joyce A. Donahue Asati Scoretary

THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

CR2E045 (7-91) (FLA. - 2194 - 3/4/92)

FILING FEE: \$35.00