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BRONSTEIN, CARLSON, GLEIM & SMITH, P.A.

Joel D. Bronstein  
Board Certified in Tax Law

Susan W. Carlson  
Board Certified in Tax Law

Holger D. Gleim  
Board Certified in Wills, Trusts & Estates

Thomas B. Smith  
Board Certified in Health Law

Jeffrey J. Kallan

Suite 1100  
150 Second Avenue North  
St. Petersburg, Florida 33701

(727) 898-6688  
Fax (727) 898-8811

Writer's E-Mail Address:  
sthomas@bcgs-law.com

Refer to File No.

971016

Writer's Direct Dial No.

(727) 898-6690

October 5, 2000

Registered Agent/Address Section  
Bureau of Corporate Records  
Division of Corporations  
Department of State  
P.O. Box 6327  
Tallahassee, FL 32314

400003419534--3  
-10/09/00--01091--017  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

RE: SPSMG Physicians Group, Inc.

Gentlemen:

Enclosed please find the original and duplicate copy of a Change of Registered Office and Agent for the above-referenced corporation, along with our check in the amount of \$35.00 representing the filing fee.

Please acknowledge filing of this document by stamping the duplicate copy and returning same to me.

If you have any questions in connection with the documents, or need further information, please contact me by telephone rather than returning the document.

Very truly yours,

*Sue Thomas*

Sue Thomas,

Paralegal to Joel D. Bronstein

AD Charge  
10-16-00  
BMS

ST/kli

Enclosures

cc: SPSMG Physicians Group, Inc.

146605

FILED  
OCT -9 PM 2:37  
TALLAHASSEE, FL 32314

CHANGE OF REGISTERED AGENT  
OF  
SPSMG PHYSICIANS GROUP, INC.

FILED  
00 OCT -9 PM 2:27  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

TO: SECRETARY OF STATE OF FLORIDA

1. The name of the Corporation is SPSMG Physicians Group, Inc.
2. The current registered office is located at 601 Seventh Street South, St. Petersburg, FL 33701 and shall remain as the registered office.
3. The current registered agent is Lynn Richne.
4. The successor registered agent will be John Jenkins.
5. The street address of the Corporation's registered office and the business office of its registered agent will be identical.
6. All changes made above have been authorized by resolutions duly adopted by the Corporation's Board of Directors.
7. All changes made above have been made by an officer of the Corporation authorized to do so by the Board of Directors.

DATED: 8/22/00

SPSMG PHYSICIANS GROUP, INC.

By: 

Mark R. Gordon, President

ACKNOWLEDGMENT

I hereby accept to act in this capacity, and agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of 607.0505, Florida Statutes.

  
John Jenkins, Registered Agent