0000a68. GARDNER, CARTON & DOUGLAS

1301 K STREET, N.W.

SUITE 900, EAST TOWER

WASHINGTON, D.C. 20005

(202) 408-7100 FAX: (202) 289-1504

INTERNET: gcdlawdc@gcd.com

December 29, 1997

Via Federal Express

WRITER'S DIRECT DIAL NUMBER

TRACY WEIR

(202) 408-7178

Florida Department of State **Division of Corporations** Amendment Section 409 E. Gaines Street Tallahassee, FL 32399

CHICAGO, ILLINOIS

RE:

Request for Filing of Statement of Change of Registered Office or Registered

Agent or Both for Corporations

Total LifeStyle Care, Inc.

Dear Sir or Madam:

Please file the enclosed original Statement of Change of Registered Office or Registered Agent or Both for Corporations ("Statement") of Total LifeStyle Care, Inc. Upon filing, kindly file-stamp and return the enclosed copy of the Statement to the undersigned at the address listed above. I have enclosed a check in the amount of thirty-five dollars (\$35.00), which covers the fees for filing the Statement.

Should you have any questions regarding the above or the attached, please contact me at (202) 408-7178. Thank you for your assistance with this matter.

Since ely yours,

Enclosures

cc:

William Porro (w/enc.)

Christopher L. White, Esq. (w/ enc.)

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 of Florida 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: Total LifeStyle Care	, Inc.
2. The mailing address of the corporation is: 3550 Biscayne Boulevard, Suite 507A			
Miami, Florid	a 33137		
3. Date of incorporation/qualification: March 18, 1997 D	ocument number: P97000026834		
4. The name and address of the current registered agent and office	: 9		
William Porro	97 DEC 30 MII: 24 P. O. Box Not Acceptable)		
	30		
18804 N.W. 79th Way	ORPO		
Miami, Florida 33015 5. The name and address of the new registered agent and office: (F	O Roy Nat Accentable)		
	2 P		
William Porro			
3550 Biscayne Boulevard, Su	ite 510		
Miami, Florida 33137	- Aw		
The street address of its registered office and the street address agent, as changed, will be identical.			
Such change was authorized by resolution duly adopted by its authorized by the board.	board of directors or by an officer so		
(OKO)	December 18, 1997		
(Signature of an officer, chairman or vice chairman of the board)	(Date)		
William Porro, Secretary	December 18, 1997		
(Printed or typed name and title)	(Date)		
Having been named as registered agent and to accept service corporation, I hereby accept the appointment as registered ag I further agree to comply with the provisions of all statutes rel performance of my ditties, and I am familiar with and accept to registered agents.	of process for the above stated ent and agree to act in this capacity. ative to the proper and complete the obligation of my position as		
(LMC/LL)	December 18, 1997		
(Signature of Registered Agent)	(Date)		
If signing on behalf of an entity:			
William Porro (Typed or Printed Name)	Secretary (Capacity)		
CP2E045(4/05)	FILING FFF: \$35.00		