## P97000028989

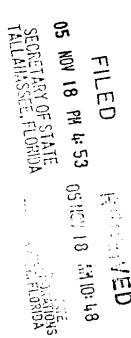
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DP 118 los



ACCOUNT NO. : 072100000032

REFERENCE: 708989

7110150

AUTHORIZATION

COST LIMIT : \$ 35.00

ORDER DATE: November 16, 2005

ORDER TIME : 10:04 AM

ORDER NO. : 708989-180

CUSTOMER NO: 7110150

## CHANGE OF AGENT

NAME: NH-DIAB, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of Florida
	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: NH-DIAB, INC.
2. The principal	office address: Wound Healing Center, 10301 Hagen Ranch Road, Entrance B, Suite 1
Boynton, FL	
3. The mailing a Boca Raton,	ddress (if different): National Healing Corp, 6400 Congress Avenue, #2200 FL 33487
4. Date of incorp	poration/qualification: March, 31, 1997 Document number: P97000028989
	I street address of the current registered agent and registered office on file with the tment of State:
	Corporation Creations Network Inc
	11380 Prosperity Farms Road, #221E
	Palm Beach Gardens, FL 33410
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office.  Corporation Service Company
	Corporation Service Company
	1201 Hays Street
	(P.O. Box NOT acceptable)
	Tallahassee, FL 32301
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
Mai	Maureen Cullen, Attorney In Fact
· · · · · · · · · · · · · · · · · · ·	re of an officer or director) (Printed or typed name and title)
I jurther agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
By: // // (	Service Company  MULL R VAMAGY  NOV. 17, 2005  (Date)
If signing on bel	half of an entity:
Michelle R. Vann	oy, Asst. Vice President
/T	wand or Printed Nama)

\* \* \* FILING FEE: \$35.00 \* \* \*