

**FOX AND ELLIS**

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P97000103945

November 2, 1998

Florida Department of State  
Division of Corporations  
Amendment Section  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Change of Registered Agent for  
Jodi M. Grosflam, M.D., P.A.

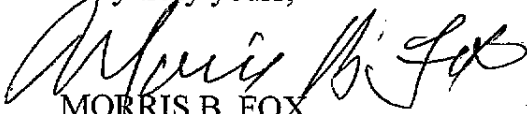
100002686091--5  
-11/12/98--01076--019  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Dear Sirs:

Enclosed please find original and copy of Statement of Change of Registered Office or  
Registered Agent and check for \$35.00.

Please file same and return copy marked "filed" for our records.

Very truly yours,



MORRIS B. FOX

MBF:MO

Enc.

Cc: client

FILED  
98 NOV 12 PM 2:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

208/27 11-12-98  
P97000103  
208/27 11-12-98

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 section 607.0502 or 607.1508, 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: JODI M. GROSLAM, M.D., P.A.

1a. Date of incorporation December 9, 1997 Document number P97000103945

2. The name and address of the current registered agent and office:

CORPORATION SERVICE COMPANY (CSI)

1201 Hays Street, Tallahassee, Florida 32301

3. The name and address of the new registered agent and office:  
(P.O. Box Not Acceptable)

JODI M. GROSLAM, M.D.

13181 Ponderosa Way, Fort Myers, Florida 33907

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.

SIGNATURE Jm Grosflam MD P.A. 11/4/98

(name and title)  
Jodi M. Grosflam, M.D., President

DATE November 4, 1998

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 COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE Jm Grosflam MD PA 11/4/98

(Registered Agent)  
Jodi M. Grosflam, M.D.

DATE November 4, 1998

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