

Requestor's Name		9634
Address		
City/State/Zip	Phone #	
Office Use Only		

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____

(Corporation Name)
(Document #)
2. _____

(Corporation Name)
(Document #)
3. _____

(Corporation Name)
(Document #)
4. _____

(Corporation Name)
(Document #)

- ☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

FILED
 99 MAY -6 AM 8:47
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

100002864971--2
 -05/06/99--01045--007
 *****35.00 *****35.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

CM
 P9800009634
 5-6-99
 JCR

Examiner's Initials	
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**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: Navix MSO Osceola, Inc.
2. The mailing address of the corporation is: 2601 S. Bayshore Drive Suite # 500
Coconut Grove, FL 33133
3. Date of incorporation/qualification: 01/30/98 Document number: P98000009634
4. The name and address of the current registered agent and office:

W. Barry Tanner

2601 S. Bayshore Drive Suite # 500

Coconut Grove, FL 33133

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

Navix Radiology Systems, Inc. / Daniel Jacobson

attn: Corporate Counsel

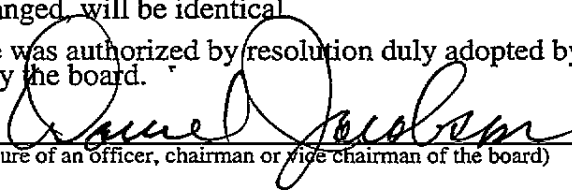
2601 S. Bayshore Drive #500

Coconut Grove, FL 33133

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The street address of its registered office 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 of an officer, chairman or vice chairman of the board)

4/14/99
(Date)

Daniel Jacobson - Secretary
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 of Registered Agent)

4/14/99
(Date)

If signing on behalf of an entity:

Daniel Jacobson
(Typed or Printed Name)

Secretary
(Capacity)

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