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COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|---|--|--|
| SUBJECT: M.D. 98 Inc. (Name of Corporation) | | |
| DOCUMENT NUMBER: P 980000 72498 | | |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. | | |
| Please return all correspondence concerning this matter to the following: | | |
| John S. Criffenden (Name of Contact Person) | | |
| M.D. 98 Inc. (Firm/Company) | | |
| do 730 Bayford Plwy St 418 | | |
| Pensarola FL 32502 (City/State and Zip Code) | | |
| For further information concerning this matter, please call: | | |
| Name of Contact Person at (851) 438-4400 (Area Code & Daytime Telephone Number) | | |

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

| Pilrsuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this |
|---|
| statement of change is submitted for a corporation organized under the laws of the State ofFlorida |
| in order to change its registered office or registered agent, or both, in the State of Florida. |
| 1. The name of the corporation: M.D. 98, Inc |
| 2. The principal office address: 730 Bayfort Parkway, Ste 418 |
| Pensacola FL 32502 |
| 3. The mailing address (if different): |
| 5. The maning address \n different\n. |
| 4. Date of incorporation/qualification: 8/17/1998 Document number: P98 0000 72498 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| James J. Reeves Esq President Resident |
| 130 Bayfront Parkway 8/e. 416 |
| Pensacola, EL 32507 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| John J. Crittenden Es & |
| JO 730 Buyfront Parkway, Ste. 415 3 TI |
| Pensacola, FL 3502 FO II |
| 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, or the corporation has been notified in writing of the change. |
| Signature of an officer or director) Tohn J. Crittenden (Printed or typed name and title) |
| 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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. |
| (Signature of Registered Agent) |
| If signing on behalf of an entity: |
| John J. Crittenden (Typed or Printed Name) |

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