002751 Address 500003016305--4 -10/18/99--01001--006 *****35.00 *****35.00 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) Certified Copy Walk in Pick up time Certificate of Status Will wait Photocopy ■ Mail out **AMENDMENTS** NEW FILINGS Profit Amendment Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS OUALIFICATION J 6232.00 Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other Examiner's Initials CR2E031(1/95)

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 $+100100$ A
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: 6LOBA L MEDICAL EMERGENCY
INC.
2. The mailing address of the corporation is: 1430 So. Federal Hwy., Sur Deer field Beach, Fl 33441
3. Date of incorporation/qualification:
4. The name and address of the current registered agent and office:
n/a
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Peggy Line
1430 So. Federal Huy., Suite 30 ET =
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 adonted by its board of discussion.
Such charge was authorized by resolution duly adopted by its board of directors or by an officer so
(Signature of an officer, chairman or vice chairman of the board)
$D_{\alpha} / C = C + C$
(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. and I am familiar with and accept the obligation of my position as
1 egg 1 / 12/00
If signing on behalf of an entity:
— Chiliy.
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(7/97)