Corporation Name) Corporation Name	j.	P99000049572						
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. (Corporation Name) (Document #) 2. (Corporation Name) (Document #) 3. (Corporation Name) (Document #) 3. (Corporation Name) (Document #) 4. (Corporation Name) (Document #) 5. (Corporation Name) (Document #) 6. (Document #) Certified Copy 6. (Annendment (Document #) 6. Annendment (Document #) 7. 2. 2. 2. 9. 2. 2. 2. 1. <	- 	7016 Hennepin Blvd. Orlando, FL 32818						
1. (Corporation Name) (Document #) 2. (Corporation Name) (Document #) 3. (Corporation Name) (Document #) 4. (Corporation Name) (Document #) 6. (Document #) Certified Copy 9. (Document #) Certified Copy 10. Mail out Will wait Photocopy 11. (Document #) (Document #) (Document #) 12. Domestication (Document #) (Document #)				Office Use Only				
2	CC	DRPORATION NAME(S) & DOCU	UMENT NUMBER(S), (if	known):				
Corporation Name) (Corporation Name) (Corporation Name) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Mail out Will wait Photocopy Certificate of Status New FILINGS Profit Inited Liability Domestication Other OTHER FILINGS Amendment Dissolution/Withdrawal Dissolution/Withdrawal Merger OTHER FILINGS Amendment Dissolution/Withdrawal Dissolution/W	1.	(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 NEW FILINGS Amendment Amendment Not for Profit Amendment Amendment Domestication Dissolution/Withdrawal Dissolution/Withdrawal Other Merger Certified Partnership Entropy Certificate of Status	2.	(Corporation Name)	(Document #)	1000067286418 -07/29/0201072001 ******70.00 ******35.00				
Walk in Pick up time Certified Copy Mail out Will wait Photocopy Certificate of Status Mail out Will wait Photocopy Certificate of Status NEW FILINGS Amendment Charge of Registered Agent Not for Profit Amendment Dissolution/Withdrawal Other Dissolution/Withdrawal Nerger OTHER FILINGS REGISTRATION/OUALIFICATION/OUALIFICATION Nerger Limited Partnership Limited Partnership Nerger Fictitious Name Foreign Limited Partnership Nerger Other Other Other Nerger Nerger	3.	(Corporation Name)	(Document #)					
Mail out Will wait Photocopy Certificate of Status Mail out Will wait Photocopy Certificate of Status Memory Profit Amendment Not for Profit Amendment Amendment Limited Liability Domestication Amendment Other Dissolution/Withdrawal Merger OTHER FILINGS REGISTRATION/OUALIFICATIONS Topo Profit Annual Report Foreign Limited Partnership Reinstatement Trademark Not for Profit	4.	(Corporation Name)	(Document #)	······································				
NEW FILINGS AMENDMENTS Profit Amendment Not for Profit Amendment Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/OUALIFICATION Annual Report Foreign Fictitious Name Trademark Other Other		Walk in Pick up time		Certified Copy				
 Profit Not for Profit Limited Liability Domestication Other Annual Report Fictitious Name Annual Report Annual Report Foreign Limited Partnership Reinstatement Other 		Mail out Will wait	Photocopy	Certificate of Status				
 Not for Profit Limited Liability Domestication Other Annual Report Fictitious Name Reinstatement Trademark Other 	<u>1</u>	NEW FILINGS	AMENDMENTS					
OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement N Trademark N Other Other		 Not for Profit Limited Liability Domestication 	Resignation of R Change of Regist Dissolution/With	drawal				
Annual Report Fictitious Name Fictitious Name Conternation Fictitious Name Conternation Conter	<u>(</u>	OTHER FILINGS	REGISTRATION/Q					
Examiner's Initials AA 2	[Limited Partners Reinstatement Trademark	hip FLOR P 0				
				Examiner's Initials AA, & 7				

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 Flonde

submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l ia u A

1. The name of the corporation : Paramedics

- 2. The mailing address of the corporation : $\times 6821$ ω . Colonial
- 3. Date of incorporation/qualification: $\times 5$ 99 q 2 Document number \$ \$990000 5

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

J Simmons_ Caory W. Colonial Dr 32818

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):

(P. O. Box Not Acceptable)

rdant conversion Oclando, FL 32818

818

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

INPU DIMMONA Signature of an officer, chairman or vice chairman of the board) esident (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

	(Signature of Registered Agent)			TALL	02	
If signing on b	ehalf of an entity:	-	(Date)	RETAR	JUL 2	
	(Typed or Printed Name)	<u> </u>	(Capacity)		Nad 6	
CR2E045(9/00)	* * * FILING FEE: \$35.00 * * *			STAT	ŝ	O
01/213/43(9/00)	DIVISION OF CORPORATIONS	P.O. Box 6327	TALLADASSEE EL 20214	DA	29	

TALLAHASSEE, FL 32314