

P99000057038

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R-A. Chang

C. Goulet
MAR -6 2007

LAW OFFICES
MICHAEL KAHN, P.A.
482 NORTH HARBOR CITY BLVD.
MELBOURNE, FLORIDA 32935

MICHAEL KAHN

TELEPHONE
(321) 242-2564
TELEFAX
(321) 254-2127

December 21, 2006

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

COPY

Re: **RIVERSIDE SURGERY CENTER, INC.**
Document No. P99000057038

Dear Sir or Madam:

Enclosed please find the Resignation of Registered Agent of Michael Kahn for the above referenced corporation along with a check made payable to Florida Department of State in the amount of eighty seven dollars and fifty cents (\$87.50) for said fee.

Please file the Resignation of Registered Agent with the Secretary of State on the date of delivery or as soon thereafter as possible and return confirmation documentation U.S. Mail at your earliest opportunity. I have enclosed a self addressed, stamped envelope for your convenience.

If you need further information, please do not hesitate to contact me.

Very truly yours,

Michael H. Kahn

Michael H. Kahn

/sg
Enc: as stated

**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, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Riverside Surgery Center, Inc.
2. The principal office address: 14410 U.S. Hwy. 1
Sebastian, FL 32958
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 8/1/99 Document number: P99000057038
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Michael Kahn
482 North Harbor City Blvd.
Melbourne, FL 32935

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

Ralph B. Monnett, Jr., MD
14410 U.S. Hwy. 1
(P.O. Box NOT acceptable)
Sebastian, FL 32958

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)

Ralph B. Monnett, Jr.
(Printed or typed name and title)

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. 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)

3/1/07
(Date)

If signing on behalf of an entity:

Ralph B. Monnett, Jr.
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

07 MAR -5 AM 11:19
AND
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Florida Department of State, Sue M. Cobb, Secretary of State

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, Michael H. Kahn, hereby resigns as Registered Agent
(name of registered agent)
for RIVERSIDE SURGERY CENTER, INC.
(name of corporation)

A copy of this resignation was mailed to the above listed corporation at its last known address.

Riverside Surgery Center, Inc.
14410 US Highway 1
Sebastian, FL 32958

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Michael H. Kahn

FEE FOR FILING THIS DOCUMENT:

\$87.50-Active Corporation

\$35.00-Administratively Dissolved Corporation