

572249

Requester's Name

1 From This portion can be removed for Recipient's records

Date 4-17-00 FedEx Tracking Number 819702815853

Sender's Name V. LORIONDE Phone 561 659-5990

Company AKERMAN SENTERFITT & EIDSON PA

Address 777 S FLAGLER DR STE 900

City WEST PALM BEACH State FL ZIP 33401

Office Use Only

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

1. _____ (Corporation Name) _____ (Document #) 300003213083--0
-04/18/00--01097--001
****770.00 *****35.00
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time _____
☐ Mail out ☐ Will wait ☐ Photocopy

- ☐ Certified Copy
☐ Certificate of State

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
00 APR 18 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Examiner's Initials

Spayne

**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: Good Samaritan Medical Pavilions, Inc.
2. The mailing address of the corporation is: 1309 N. Flagler Drive, West Palm Beach, FL 33401-3406, US
3. Date of incorporation/qualification: 08/08/1991 Document number: S72249
4. The name and address of the current registered agent and office:

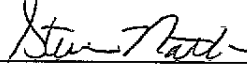
Valerie Goodwin Larcombe
1309 North Flagler Drive
West Palm Beach, FL 33401

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

Valerie G. Larcombe, Esq.
Akerman Senterfitt
Phillips Point - East Tower
777 South Flagler Drive, Suite 900
West Palm Beach, FL 33401-6125

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.



Steven Nathan, President and CEO

4/11/00

(Date)

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)

4/14/2000

(Date)

If signing on behalf of an entity: Valerie G. Larcombe, Secretary

FILING FEE: \$35.00

Division of Corporation

P.O. Box 6327

Tallahassee, FL 32314

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00 APR 18 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA