V 46518



ACCOUNT NO. : 072100000032

REFERENCE :

619060

5124708

AUTHORIZATION

COST LIMIT

35 Marie

FILED

OIL 17 PH 12: 08

FILED

OIL 17 PH 12: 08

ORDER DATE: June 11, 2002

ORDER TIME : 10:26 AM

ORDER NO. : 619060-485

100006467281--8

CUSTOMER NO:

5124708

CUSTOMER: Peter Laterza, Vice President

Omnicare, Inc Suite 1600

100 E. River Center Blvd. Covington, KY 41011-1663

CHANGE OF AGENT

NAME:

MEDICAL SERVICES CONSORTIUM,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

C. Coulliste JUL 1 7 2002

CONTACT PERSON: Ta-tanisha Adams -- EXT# 1131

EXAMINER:

DIVISION OF CORPORATION

94:11

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

Pursuant to the	provisions of sections (607.0502, 617.0502, 60	7.1508, or 617.1508,	Florida Statutes,	
the undersigned	l corporation organized u	nder the laws of the Sta	te of Florida	agent or hoth in	rêr e∡fáns.
	owing statement in order	to change us regisiere	a office or registered	agent, or doin, in	
the State of Flor	riaa. the corporation :	And the second of the second o	And the second s	E	
	RVICES CONSORTIUM, INC			影三音	* · · · ·
	The second secon	and the second discount of the second of the	R BLVD	SEL	i 9
•	address of the corporation			Fc R	•: •: •: •: •: •: •: •: •: •: •: •: •: •
	, KY 41011	A CONTRACTOR OF THE CONTRACTOR	The state of the s	22.00	•
3. Date of inco	orporation/qualification;	une 29, 1992	Document numb	per: V4651'8	. , -
4. The name ar	nd address of the current	registered agent and of	fice:		-=
	CT Corporation System	· · · · · · · · · · · · · · · · · · ·			
	1200 South Pine Island	d Road	·		
	Plantation, FL 33324				
5. The name ar	nd address of the new reg	ristered agent (if change . O. BoxNot Acceptabl		office (if changed):	
	Corporation Service Co	ompany			क संस्थित स्थापना स्थापन
	1201 Hays Street	er ja e <u>i</u>			and a section
	Tallahassee, FL 3230	1			
agent, as chang	ress of its registered offi ged, will be identical.	Section 1988 Control of the Control	=		
Such change wanthorized by	vas authorized by resolut	ion duly adopted by its	board of directors o	r by an officer so	
Polari	Vin Plant	por .	7/	12/02	
(Signatur	e of an officer, chairman or vice	chairman of the board)		(Pate)	
PATRICIA PIZZU	JTO, Attorney in Fact	Live a la company de la compan	***		- 1
	(Printed or typed name		· · · · · · · · · · · · · · · · · · ·	ে টাইডিউি এই-জিজিডিউটি এই ১০০১ - ১৯৮৪ - শি	
corporation, 1	amed as registered agen hereby accept the appoir to comply with the prov f my duties, and I am fan nt.	itment as registerea ag ísions of all statutes rel	ent and agree to act t ative to the proper at	n inis capacuy. 1d complete	
Corporation S	Service Company		7/12/0	2	
	Signature of Registered Agent)	o Dunian	(Date)	and the second of the second 	1
If signing on beh	alf of an entity:	Laura R. Dunlap Asst. Secretary		1.	
	(Typed or Printed Name)		(Capacity)		7 e à
•	(- 1/2 min on a minima a minor)				

CR2E045(9/00)

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