296213



ACCOUNT NO. : 072100000032

700002307247--6

REFERENCE : _53123

AUTHORIZATION : TOTAL

COST LIMIT : \$ 35.00

ORDER DATE: September 16, 1997

ORDER TIME : 5:10 PM

ORDER NO. : 531232

CUSTOMER NO: 4319227

CUSTOMER: Ms. Judy Abrahamson

Interim Services Inc. 2050 Spectrum Boulevard

Fort Lauderdale, FL 33309

CHANGE OF AGENT

INTERIM HEALTHCARE INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

NAME:

CONTACT PERSON: Andrea C. Mabr

Florida Department of State, Sandra B. Mortham, Secretary of State

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

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 Stat		
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: <u>Interim Healthcare I</u>	inc.	
2. The mailing address of the corporation is:2050 Spectru	ım Blvd., Ft. Laud	erdale, FL 33309
3. Date of incorporation/qualification: 8-25-65	Document number:	296213
4. The name and address of the current registered agent and of	fice:	97 SEU
Smith, John B.		SEP SEP
2050 Spectrum Blvd.		SSEE
Ft. Lauderdale, FL 33309		
5. The name and address of the new registered agent and offic	e: (P. O. Box Not Acce	ptage .
Umansky, Raphael D.		DA C
2050 Spectrum Blvd.		
Ft. Lauderdale, FL 33309		
The street address of its registered office and the street add agent, as changed, will be identical.	ress of the business of	fice of its registered
Such change was authorized by resolution duly adopted by authorized by the board.	its board of directors	or by an officer so
land Harabara	9/	250/92
(Signature of an officer, chairman or vige chairman of the board)		(Date)
Paul Haggard, CFO/Treasurer	9-26-97	
(Printed or typed name and title)		(Date)
Having been named as registered agent and to accept serve corporation. I hereby accept the appointment as registered I further agree to comply with the provisions of all statutes performance of my duties, and I am familiar with and acce	ice of process for the a lagent and agree to ac relative to the proper pt the obligation of my	nove statea of in this capacity. and complete oposition as
registered agent	9/24/	•
(Signature of Registered Agent)	(Date)	
If signing on behalf of an entity:		
Raphael D. Umansky	General Cou	ınsel
(Typed or Printed Name)	(Capacit	(y)

CR2E045(3/96)