

P07284

Document Number Only

CT Corporation System
660 East Jefferson Street
Tallahassee, FL 32301
Tel 850 222 1092
Fax 850 222 7615
Attn: Jeff Netherton

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-05/24/99--01109--025
*****35.00 *****35.00

CORPORATION(S) NAME

Insta-Care Pharmacy Services Corporation *RA Change*

- | | | |
|--|---|--|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input checked="" type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

FILED
99 MAY 24 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name Log/99 05/24/99
Availability Log/99
Document
Examiner RA
Updater RA
Verifier _____
Acknowledgement _____
W.P. Verifier _____

RECEIVED
99 MAY 24 PM 2:52
DIVISION OF CORPORATION

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

1a. The name of the corporation is: INSTA-CARE PHARMACY SERVICES CORPORATION

1b. The mailing address of the corporation is: 4000 Metropolitan Dr., Orange, CA 92868

1c. Date of incorporation: 8-26-85 Document number: P07284

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

National Registered Agents, Inc.
526 E. Park Ave., Tallahassee, FL 32301

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

C T Corporation System
1200 South Pine Island Road
Plantation, FL 33324

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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.

[Signature]
(Signature of an officer, chairman or vice chairman of the board)

May 17, 1999
(Date)

Milan A. Sawdei, Executive Vice President,
Chief Legal Officer and Secretary
(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 registered agent.

[Signature]
(Signature of Registered Agent)

May 20th, 1999
(Date)