

S50396



ACCOUNT NO. : 072100000032
REFERENCE : 017760 4352697
AUTHORIZATION : Patricia Pujut
COST LIMIT : \$ 35.00

ORDER DATE : November 2, 1998

ORDER TIME : 11:30 AM

ORDER NO. : 017760

000002687360-4

CUSTOMER NO: 4352697

CUSTOMER: Linda McDonald, Legal Asst
Humana Inc.
500 West Main Street
P.o. Box 1438
Louisville, KY 40201-1438

CHANGE OF AGENT

NAME: FAMILY HEALTH PLAN
ADMINISTRATORS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY

CONTACT PERSON: Angie Glisar

RECEIVED
98 NOV 13 PM 1:34
DIVISION OF CORPORATION

FILED
98 NOV 13 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

See 11/16

*** 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 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: FAMILY HEALTH PLAN ADMINISTRATORS, INC.

2. The mailing address of the corporation is:

500 West Main Street, Louisville, KY 40202

3. Date of incorporation/qualification: 5/7/91 Document number: 550396

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

CT CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

PLANTATION, FLORIDA 33324

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

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

FILED 98 NOV 13 PM 2:06 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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 of an officer, chairman or vice chairman of the board)

10-16-98 (Date)

WALTER E. NEELY, VICE-PRESIDENT (Printed or typed name and title)

10-16-98 (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)

November 11, 1998 (Date)

If signing on behalf of an entity:

Maureen W. Cullen ASST. VICE-PRESIDENT (Typed or Printed Name) (Capacity)