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FORM BCA 5.10/5.20 (rev. Dec. 2003) STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE Business Corporation Act

Doc#: 0805941020 Fee: \$26.00 Eugene "Gene" Moore Cook County Recorder of Deeds Date: 02/28/2008 09:38 AM Pg: 1 of 2

Jesse White, Secretary of State Department of Business Services Springfield, IL 62756 Telephone (217) 782-3647 www.cyberdrivalllineis.com

FILED

FEB 1 1 2008

JESSE WHITE SECRETARY OF STATE

Remit payment in the form of a check or money order payable to the Secretary of State.

10.	no Secretary of State,						
		File #_6499720	3	Filing Fee: \$25,00	Approved: 10		
	Submi, in duplicate —	Type or Print cle	arly in black mik	Do not write above this lin			
1.	CORPORATE NAME. antage Oncology Treatment Centers -South Suburban, Inc.						
^	STATE OF COLUMN						
2.	STATE OR COUNTRY OF INCORPORATION: Delaware						
3.	Name and address of the registered agen, and registered office as they appear on the records of the office of the Secretary of State (before change):						
	Registered Agent C T Corporation System						
	Registered Office 208	rst Name SO LaSalle St, Suite	Middle Name 814	Las	l Name		
		Vumber Street cago IL 606	504	A P.O. Box alone is not a Co	cceptable) ook		
		City	ZIF Grac	.C	ounty		
4 ,	Name and address of the registered agent and registered office stail be (after all changes herein reported):						
	Registered Agent National Registered Agents, Inc.						
	Fin Registered Office 200	st Name West Adams Street	Middle Name	Las	! Name		
		<i>lumber Street</i> ⊳ago, IL 60606, Count	.Suite No. (A y of Cook	P.O. Box alone is not ac	cceptable)		
		Gity	ZIP Code	C	ounly		
ō,	The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.						
õ.	The above change was autho	rized by: ("X" one bc	ox.onlv)		C		
	a. By resolution duly ado	pled by the board of	directors,	(Note 5)			
	b. D By action of the registe			(Note 6)			

SEE REVERSE SIDE FOR SIGNATURES(S).

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7. (If authorized by the board of directors) The undersigned corporation has cause under penalties of perjury, that the facts s	sed this sta	stement to be signed by a duly authorized officer who affirms.
Dated (Month & Day)	, loty (Year)	Unmaye Oncology Treatment Centers South Subwax (Exact Name of Corporation)
(Any Authorized Officer's So Soe Christon (Type b) Print Name and	CHETY	
(If change of registered office by registered The undersigned, under penalties of particular penalties penalties penalties penalties penalties penalties penalties penaltie	d agent, sig perjury, aff	gn here. See Note 6) irms that the facts stated herein are true.
Dated		
(Month & Day)	(Year)	(Signature of Registered Agent of Record)
		(Type or print name. If the registered agent is a corporation, type or print the name and title of the officer who is signing on its behalf.)

NOTES

- 1. The registered office may, but need not be the same as the principal office of the corporation. However, the registered office and the office address of the registered agent must be the same.
- 2. The registered office must include a street or road address, a post office box number alone is not acceptable.
- 3. A corporation cannot act as its own registered agent.
- 4. If the registered office is changed from one county to another, then the corporation must file with the recorder of deeds of the new county a certified copy of the articles of incorporation and a certified copy of the statement of change of registered office. Such certified copies may be obtained ONLY from the Secretary of State.
- 5. Any change of registered agent must be by resolution adopted by the board of directors. This statement must then be signed by a duly authorized officer.
- 6. The registered agent may report a change of the registered office of the corporation for which he or she is registered agent. When the agent reports such a change, this statement must be signed by the registered agent. If a corporation is acting as the registered agent, a duly authorized officer of such corporation must sign this statement.