



0510 6 1556

COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

LLC-1016
(07/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE
AND/OR REGISTERED AGENT

1. Limited Liability Company's Name: Limited Liability Company's SCC ID#: S088246 - 6

Virginia Center for Plastic Surgery, L.L.C.

2. Current registered agent's name and registered office address on record: 051025 4007

CONARD B MATTOX III
MCCANDLISH HOLTON PC
1111 E MAIN ST STE 1500

~~051018 1049~~

RICHMOND, VA 23219-0000

~~051024 1097~~

Fully complete items 3, 4 and 5, even if some information remains unchanged.

3. Registered agent's name and registered office address, including the street and number, if any, after this statement is filed with the Commission:

GEORGE B. SHEPHERD, JR.
9030 STONY POINT PARKWAY, SUITE 400
RICHMOND, VIRGINIA 23235

4. The registered agent named in item 3 is (mark appropriate box):

(A) an individual who is a resident of Virginia and

- a member or manager of the limited liability company.
- a member or manager of a limited liability company that is a member or manager of the limited liability company.
- an officer or director of a corporate member/manager of the limited liability company.
- a general partner of a general or limited partnership that is a member or manager of the limited liability company.
- a trustee of a trust that is a member of the limited liability company.
- a member of the Virginia State Bar.

OR

(B) a domestic or foreign stock or nonstock corporation, limited liability company or registered limited liability partnership authorized to transact business in Virginia.

5. Locality of registered office:

(A) Current registered office locality: RICHMOND CITY

(B) Registered office locality after this statement is filed: county or city of RICHMOND

6. After the foregoing change(s) is (are) made, the limited liability company will be in compliance with the requirements of § 13.1-1015 of the Code of Virginia.

7. (A) The undersigned (manager, person who has been delegated the right and power to manage the company's business and affairs, member, or person who formed the limited liability company) executes this statement on behalf of the limited liability company. (See Instructions for requisite authority.)

10/1
(date)

[Signature]
(signature)

MASON M. WILLIAMS, M.D.
(printed name and title)
MEMBER

OR

(B) (May be used in lieu of (A) only for the circumstances set forth in the Instructions.)

The undersigned registered agent declares that a copy of this statement has been mailed to the limited liability company named in item 1, above.

(date)

(signature of registered agent)

SEE INSTRUCTIONS

