

F1000000476S

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

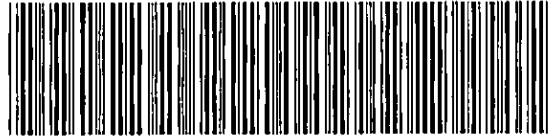
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NOV 27 AM 09:58

2019 NOV 26 AM 10:38
TALL...
NOV 27 2019
C. KINSEY

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 042022 8268091
AUTHORIZATION : *Spud Clement*
COST LIMIT : \$ 35:00

ORDER DATE : November 11, 2019
ORDER TIME : 1:43 PM
ORDER NO. : 042022-040
CUSTOMER NO: 8268091

FOREIGN FILINGS

NAME: TELADOC PHYSICIANS, P.A.

XX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER: _____

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F10000004765

(Document number of corporation (if known))

1. Teladoc Physicians, P.A.
(Name of corporation as it appears on the records of the Department of State)
2. Texas (Incorporated under laws of) 3. 10/28/2010 (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)


4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____
5. Teladoc Health Medical Group, P. A.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.
_____ (New duration)
7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.
_____ (New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

2019 NOV 26 AM 10:38
TELEDOC HEALTH MEDICAL GROUP, INC.


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Kyon Hood President

(Typed or printed name of person signing) (Title of person signing)



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that on November 21, 2019, Teladoc Physicians, P.A., a Professional Association (file number 800324040), changed its name to Teladoc Health Medical Group, P.A.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 25, 2019.



A handwritten signature in black ink, appearing to read "Ruth R. Hughs".

Ruth R. Hughs
Secretary of State