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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

02 DEC 23 AM 10:20

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02 DEC 27 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/27/02
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Amend
38



UCC FILING & SEARCH SERVICES, INC.
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 Tallahassee, Florida 32301
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December 23, 2002

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Paralign Revenue Management, Inc.

Filing Evidence

- ☒ Plain/Confirmation Copy
- ☐ Certified Copy

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
☐	Profit
☐	Non Profit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☒	Amendment
☐	Resignation of RA Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Reports
☐	Fictitious Name
☐	Name Reservation
☐	Reinstatement

REGISTRATION/QUALIFICATION	
☐	Foreign
☐	Limited Liability
☐	Reinstatement
☐	Trademark
☐	Other



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State

December 23, 2002

UCC FILING & SEARCH SERVICES
526 E. PARK AVENUE
TALLAHASSEE, FL 32301

SUBJECT: PARALIGN REVENUE MANAGEMENT, INC.
Ref. Number: F99000005865

We have received your document for PARALIGN REVENUE MANAGEMENT, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Teresa Brown
Document Specialist

Letter Number: 602A00067101

RECEIVED
02 DEC 26 PM 1:53
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
12/27



Secretary of State
Corporations Division

Subject: Argent Healthcare Financial Services, Inc.

To whom it may concern:

Argent Healthcare Financial Services, Inc. has previously filed a name registration with your department for the purpose of protecting the name for future use. We are now ready to use the name in your state and we are submitting name change amendment forms to change the name of Paralign Revenue Management, Inc. to Argent Healthcare Financial Services, Inc.

Please accept this letter as our consent to allow our name change to be filed using the name we already have registered with your department.

If you have any questions, or need any additional information, please contact Andrea Wenz at 773 250-0188. Thank you for your prompt attention to this matter.

Sincerely,

David H. Langsam
President and CEO

3500 W. Paterson Ave. Chicago, IL 60659
TEL 773.250.0168 FAX 773.250.0184 WEB www.argenthfs.com

Argent Healthcare Financial Services

(Pursuant to s. 607.1504, F.S.)

SECTION I

Name of corporation as it appears on the records of the Department of State.

Incorporated under laws of

Date authorized to do business in Florida

SECTION II

its jurisdiction of incorporation? November 18, 2002

Name of corporation after the amendment, adding suffix "corporation" "company" or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation.

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.

Signature _____

Date _____

Typed or printed name

Title

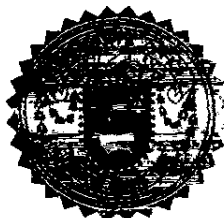
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Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "PARALIGN REVENUE MANAGEMENT, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "ARGENT HEALTHCARE FINANCIAL SERVICES, INC.", THE EIGHTEENTH DAY OF NOVEMBER, A.D. 2002, AT 9 O'CLOCK A.M.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

3114865 8320

AUTHENTICATION: 2097151

020710828

DATE: 11-19-02