

MO500004928

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

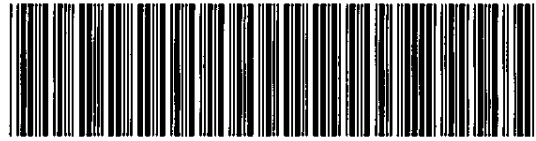
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 846010 5048595

AUTHORIZATION :

COST LIMIT : \$ 55.00

Spuddean

ORDER DATE : April 11, 2007

ORDER TIME : 1:23 PM

ORDER NO. : 846010-005

CUSTOMER NO: 5048595

FOREIGN FILINGS

NAME: ACS FEDERAL HEALTHCARE, LLC

 CORPORATE
 LIMITED PARTNERSHIP
XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds -- EXT#2933

EXAMINER: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO
FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

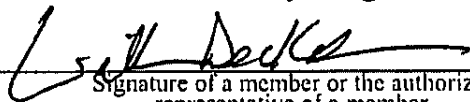
SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: ACS FEDERAL HEALTHCARE, LLC
2. Jurisdiction of its organization: DELAWARE
3. Date authorized to do business in Florida: 09/05/2005

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 04/10/2007
5. New name of the limited liability company: ACS FEDERAL SOLUTIONS LLC
6. If the amendment changes the period of duration, indicate new period of duration:
NO CHANGE
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
NO CHANGE
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: NO CHANGE

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized



Signature of a member or the authorized
representative of a member

WILLIAM L. DECKELMAN, JR.
Typed or printed name of signee

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "ACS FEDERAL HEALTHCARE, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "ACS FEDERAL SOLUTIONS LLC", THE TENTH DAY OF APRIL, A.D. 2007, AT 1:08 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

07 APR 11 PM 14:20
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SECRETARY OF STATE
TAMARA S. FLORES



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

3933209 8320

070421377

AUTHENTICATION: 5584331

DATE: 04-11-07