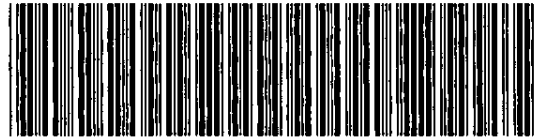


MO80000001029

(Requestor's Name)



600247851926

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

05/15/13--01004--007 \*\*25.00

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*Amend*

Office Use Only

STATE OF MICHIGAN  
DEPARTMENT OF STATE

2013 MAY 15 AM 8:55

FILED

J. SAULSBERRY  
EXAMINER  
MAY 16 2013

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AUREUS HEALTHCARE ONE LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT L. HERBOLSHEIMER  
Name of Person

AUREUS HEALTHCARE ONE LLC  
Firm/Company

13609 CALIFORNIA STREET  
Address

OMAHA, NE 68154  
City/State and Zip Code

RHERBOLS@CA-INDUSTRIES.COM  
E-mail address: (to be used for future annual report notification)

2013 MAY 15 AM 8:55  
FILED  
STATE OF FLORIDA  
TALLAHASSEE

For further information concerning this matter, please call:

ROBERT HERBOLSHEIMER at ( 402 ) 891-0009  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee     \$30 Filing Fee & Certificate of Status     \$55 Filing Fee & Certified Copy     \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT  
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: Aureus Healthcare One LLC

2. Jurisdiction of its organization: Nebraska

3. Date authorized to do business in Florida: March 4, 2008

**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? \_\_\_\_\_

5. New name of the limited liability company: \_\_\_\_\_  
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

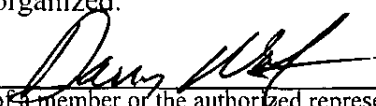
6. If the amendment changes the period of duration, indicate new period of duration: \_\_\_\_\_

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

Delaware

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: \_\_\_\_\_

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

Dawn Wolf, Manager

Typed or printed name of signee

**Filing Fee: \$25.00**

2013 MAY 15 AM 8:55  
RECEIVED  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE

FILED

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AUREUS HEALTHCARE ONE LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF MAY, A.D. 2013.

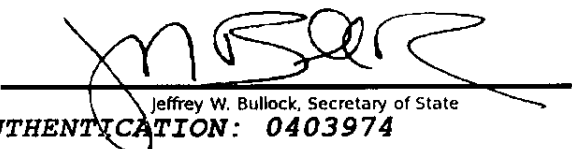
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5314570 8300

130519366

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 0403974

DATE: 05-02-13