

**H12000004131**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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AUG 24 2012  
L. SELLER

**\*RE-SUBMIT\***

Please retain original filing date of submission 8/16

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
MEDICAID ELIGIBILITY & DENIAL SERVICES, LLC

Certificate of Status	0
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FILED  
2102/2012  
12 AUG 16 AM 11:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

August 17, 2012

MEDICAID ELIGIBILITY & DENIAL SERVICES, LLC  
540 SOUTH PINE MEADOW DRIVE  
DEBARY, FL 32713

SUBJECT: MEDICAID ELIGIBILITY & DENIAL SERVICES, LLC  
REF: M12000004131

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. You may download a fill-in-the-blank written consent form from our website [www.sunbiz.org](http://www.sunbiz.org).

The alternate name must end with the words Limited Liability Company, the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: Limited Company, L.C., and LC.

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) 245-6051.

850-617-6381

8/17/2012 10:22:21 AM PAGE 2/002 Fax Server

Leslie Sellers  
Regulatory Specialist II

FAX Aud. #: H12000206788  
Letter Number: 012A00021224

**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: Medicaid Eligibility & Denial Services, LLC
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: 7/20/2012

**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? 8/13/2012
5. New name of the limited liability company: MEDS Holdings, LLC  
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")  
Medicaid Eligibility & Denial Solutions, 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:  
\_\_\_\_\_
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

Steven L. Rist

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

FD07 - 05/04/2009 CT System Online

**FILED**  
12 AUG 16 AM 11:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE  
STATE OF FLORIDA**

We, the undersigned, do hereby certify that we are the Managers and/or Managing

Members of MEDS Holdings, LLC

(Name of Limited Liability Company)

a limited liability company duly organized and existing under the laws of

Delaware

(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the  
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the  
following name to transact business in the state of Florida:

Medicaid Eligibility Denial & Solutions, LLC

(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability  
Company, L.L.C., or LLC.)

Date: August 17, 2012

Signature(s) of Manager(s) and/or Managing Member(s):



Scott C. Brown - Manager

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CR2E122 (7/07)

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "MEDICAID ELIGIBILITY  
& DENIAL SERVICES LLC", FILED A CERTIFICATE OF AMENDMENT,  
CHANGING ITS NAME TO "MEDS HOLDINGS, LLC", THE THIRTEENTH DAY OF  
AUGUST, A.D. 2012, AT 2:24 O'CLOCK P.M.

5184948 8320

120943253

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: 9785621

DATE: 08-16-12