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## **COVER LETTER**

(Firm/Company)  5959 S. Sherwood Forest Blvd.  (Address)  Baton Rouge, LA 70816  (City, State and Zip Code)  For further information concerning this matter, please call:  Celeste Peiffer  (Name of Contact Person)  Enclosed is a check for the following amount:  \$\frac{\$\$52.50\$ Filing Fee}{\$\$and Certificate of Status}\$\$\$S105.00\$ Filing Fee and Certified Copy, and Certificate of Status}\$\$\$\$\$\$\$\$\$\$\$\$\$\$MAILING ADDRESS:  Registration Section  Division of Corporations Clifton Building  P. O. Box 6327	TO: Registration Division of C			
Please return all correspondence concerning this matter to:  Celeste Peiffer  (Contact Person)  Amedisys, Inc.  (Firm/Company)  5959 S. Sherwood Forest Blvd.  (Address)  Baton Rouge, LA 70816  (City, State and Zip Code)  For further information concerning this matter, please call:  Celeste Peiffer  (Name of Contact Person)  Enclosed is a check for the following amount:  \$52.50 Filing Fee  and Certificate of Status  STREET ADDRESS:  Registration Section  Division of Corporations  Clifton Building  P. O. Box 6327				y Limited Partnership)
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(Contact Person)  Amedisys, Inc.  (Firm/Company)  5959 S. Sherwood Forest Blvd.  (Address)  Baton Rouge, LA 70816  (City, State and Zip Code)  For further information concerning this matter, please call:  Celeste Peiffer  (Name of Contact Person)  (Area Code and Daytime Telephone Number)  Enclosed is a check for the following amount:  \$52.50 Filing Fee	Please return all corr	respondence concernir	ng this matter to:	
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(City, State and Zip Code)  For further information concerning this matter, please call:  Celeste Peiffer  at (225) 292-2031  (Name of Contact Person)  Enclosed is a check for the following amount:  \$\frac{1}{2}\$\$ \$52.50 Filing Fee and Certificate of Status  \$\frac{1}{2}\$\$ \$113.75 Filing Fee, Certified Copy, and Certificate of Status  \$\frac{1}{2}\$\$ \$113.75 Filing Fee, Registration Section  Division of Corporations  Clifton Building  \$\frac{1}{2}\$\$ \$0. Box 6327		(Address)		-
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Celeste Peiffer  (Name of Contact Person)  Enclosed is a check for the following amount:  \$\text{S113.75 Filing Fee} \text{and Certified Copy} \text{S113.75 Filing Fee, and Certificate of Status}  \$\text{STREET ADDRESS:} \text{Registration Section} \text{Registration Section} \text{Division of Corporations} \text{Corporations} \text{Division of Corporations} \text{Corporations} \text				-
Celeste Peiffer  (Name of Contact Person)  (Area Code and Daytime Telephone Number)  Enclosed is a check for the following amount:  □ \$52.50 Filing Fee □ \$61.25 Filing Fee and Certificate of Status  STREET ADDRESS:  Registration Section  Division of Corporations  Clifton Building  Area Code and Daytime Telephone Number)  (Area Code and Daytime Telephone Number)  ### \$105.00 Filing Fee □ \$113.75 Filing Fee, Certified Copy, and Certified Copy and Certified Copy and Certificate of Status  #### MAILING ADDRESS:  Registration Section  Division of Corporations  Clifton Building  P. O. Box 6327		· · ·		
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	Division of Corporations		•	
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2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301			Tallaha	assee, FL 32314

### NOTICE OF CANCELLATION FOR FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

AccuMed Health Services	s, L.P.	
(Name of limited parts	nership or limited liability lim	ited partnership)
Texas		
(J	Jurisdiction of formation)	
8/31/2004		
(Date author	rized to transact business in Fl	orida)
This foreign limited partnership or transacting business in Florida and s. 620.1907, F.S.  This entity appoints the Florida Deprights of action arising out of the transfer date, if other than the date (Effective date cannot be prior to nor more Department of State.)	wishes to cancel its certi partment of State as its agansaction of business in t	ficate of authority pursuant to gent for service of process for this state.
Signature of a general partner:  Typed or printed name: By: AccuMed Genpar, L.L.C, general partner:	eneral partner	TALLAHASSES PRI
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	AUNA ORIUA ORIUA ORIUA

# Amedisys, Inc.

5959 S. Sherwood Forest Blvd Baton Rouge, LA 70816

Via FedEx Standard Overnight

January 9, 2014

Florida Department of State Attn: Division of Corporations / **Registration Section** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Cancellation of Foreign LP and subsequent Application to register the converted LLC: AccuMed Health Services, L.P. converted to AccuMed Health Services, L.L.C.

Dear Sir or Madam:

Effective Dec. 31, 2013, AccuMed Health Services, L.P., a Texas limited partnership converted into a limited liability company in its home state. I have included a copy of the Texas Secretary of State's Certificate of Fact showing the current existence of the newly converted LLC. We now would like to update our filings in Florida for this entity by cancelling the foreign LP registration and registering the foreign LLC to do business with your state.

Please find enclosed the Notice of Cancellation of a foreign LP, along with check #582068 in the amount of \$113.75 to cover filing fees and other costs. Also, you find an application of the foreign LLC to be authorized to transact business with your state, along with check #582069 in the amount of \$160.00 to pay for those costs.

If further documentation or information is required to facilitate the processing of these filings, please contact me at (225) 299-3908 or email at allison.wadhwani@amedisys.com.

Sincerely,

Allison Wadhwani

Paralegal / Legal Department

Amedisys, Inc.

Enclosure(s)



Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Coby Shorter III Deputy Secretary of State

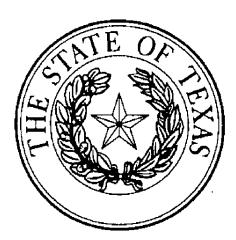
# Office of the Secretary of State

### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Amendment for AccuMed Health Services, L.L.C. (file number 801902314), a Domestic Limited Liability Company (LLC), was filed in this office on December 19, 2013.

It is further certified that the entity status in Texas is in existence.

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 January 07, 2014.



Coby Shorter III Deputy Secretary of State

TID: 10264

Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services Document: 523315910003