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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Phone : (850)222-1092 Pax Number : (850)878-5368

COR AMND/RESTATE/CORRECT OR O/D RESIGN

MATRIA HEALTH ENHANCEMENT COMPANY

RECEIVED NAR 12 AM 8: 00 CRETARY OF STATE LAHASSEE. FLORID

 Certificate of Status
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 6

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 Estimated Charge
 \$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

SECTION ((1-3 must be completed)

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Assistant Secretary	
(Title of person signing)	-
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FLOST - 4/11/07 C.T. Symon Chilling

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE CERTIFICATE OF MERGER, WEICH MERGES:

"MATRIA HEALTH ENHANCEMENT COMPANY", A DELAWARE CORPORATION,
WITH AND INTO "CORSOLUTIONS INC." UNDER THE NAME OF "ALERE
HEALTH IMPROVEMENT COMPANY", A CORPORATION ORGANIZED AND
EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE, WAS RECEIVED
AND FILED IN THIS OFFICE THE THIRTY-FIRST DAY OF AUGUST, A.D.
2007, AT 11:04 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION SHALL BE GOVERNED BY THE LAWS OF THE STATE OF DELAWARE.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF MERGER IS THE THIRTY-FIRST DAY OF AUGUST, A.D. 2007, AT 11:59 O'CLOCK P.M.

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UTHENTY CATION: 7181970

DATE: 03-12-09

You may verify this certificate online at corp.delaware.gov/authver.shtml