# Fealth Louis Requester's Name 1301 Sawgas Confky Address Surrise J 33323 City/State/Zip Phone #

Office Use Only

#### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1		000041347777 -05/03/0101133024
(Corporation Name)	(Document #)	*****35.00 *****35.00
2(Corporation Name)	(Document #)	GI MAY I
(Corporation Name)	(Document #)	6 PM 3: SEE, FLOO
(Corporation Name)	(Document #)	S 6
□ Walk in    □ Pick up time      □ Mail out    □ Will wait	Photocopy	Certified Copy Certificate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment  Resignation of R.A., C  Change of Registered  Dissolution/Withdraw  Merger	Agent
OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUAL  Foreign Limited Partnership Reinstatement Trademark Other	<u>JIFICATION</u>

**Examiner's Initials** 



May 11, 2001

HEALTH ASURE, INC. 1301 SAWGRASS CORPORATE PARKWAY SUNRISE, FL 33323

SUBJECT: NATURE'S PRIDE, INC. Ref. Number: F00000007017

We have received your document for NATURE'S PRIDE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 487-6869.

Teresa Brown Corporate Specialist

Letter Number: 601A00028503

## 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 I (1-3 MUST BE COMPLETED)

		E. C. C.
NATURE'S PRIDE, INC.	1 01 2	<u> </u>
Name of corporation as it appears	on the records of the Department of State.	ALC:
DEL ALLA DEL		T
2. DELAWARE	3. DECEMBER 18, 20	00
Incorporated under laws of	Date authorized to do busines	s in Florida
SE (4-7 COMPLETE ONL)	CTION II Y THE APPLICABLE CHANGE§	
(4-7 COMPLETE ONL)	THE APPLICABLE CHANGES	
If the amendment changes the name of the compact	on whom were the change of Costs I was 1	at
4. If the amendment changes the name of the corporati		er the laws of
its jurisdiction of incorporation? MARCH 19, 20	001	· — — — <del> </del>
HEALTH ASURE, INC.		
Name of corporation after the amendment, adding suffix "corporation contained in new name of the corporation.	ation" "company" or "incorporated." or app	copriate abbreviation, if
not contained in new name of the corporation.	The second secon	
. If the amendment changes the period of duration, in	dicate new period of duration.	
Ne	w Duration	
. If the amendment changes the jurisdiction of incorpo	oration, indicate new jurisdiction	
1	Juniorioni,	
4 N		
New	Jurisdiction	
I II		
$\mathcal{M} \mathcal{M}$	5/15/01	
Signature	Date	
MEYER MINSKT Typed or printed name	VICE_PRESIDENT	
rypod or printed name	Title	

### State of Delaware Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE RESTATED CERTIFICATE OF "NATURE'S PRIDE, INC.", CHANGING ITS NAME FROM "NATURE'S PRIDE, INC." TO "HEALTH ASURE, INC.", FILED IN THIS OFFICE ON THE NINETEENTH DAY OF MARCH, A.D. 2001, AT 9 O'CLOCK A.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

Warriet Smith Windson, Secretary of State

3325712 8100

010135353

AUTHENTICATION: 1032189

DATE: 03-20-01