

**F030000000259**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
BRIM HEALTHCARE, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
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RECEIVED

11 FEB -8 AM 10:02

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Brim Healthcare, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** F03000000259

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Margaret Alexander

(Name of Contact Person)

Bass, Berry & Sims

(Firm/Company)

150 3rd Avenue South, Suite 2800

(Address)

Nashville, TN 37201

(City/State and Zip Code)

For further information concerning this matter, please call:

Margaret Alexander

(Name of Contact Person)

at ( 815 ) 259-8721

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$35.00 Filing Fee



\$43.75 Filing Fee &  
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**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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)**

F03000000259

(Document number of corporation (if known))

**FILED**  
**11 FEB - 8 PM 2:56**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

1. Brim Healthcare, Inc.

(Name of corporation as it appears on the records of the Department of State)

2. Oregon

(Incorporated under laws of)

3. January 17, 2003

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 10/1/2010

5. HealthTech Management Services, Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

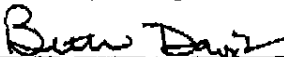
6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Beth Davis

(Typed or printed name of person signing)

Secretary

(Title of person signing)

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**CERTIFICATE**

# *State of Oregon*

**OFFICE OF THE SECRETARY OF STATE**  
**Corporation Division**

*I, KATE BROWN, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:*

**BRIM HEALTHCARE, INC.**

*was filed under the Oregon*

*Business Corporation Act*

*on April 14, 1988*

*Articles of Amendment*

*were filed on October 1, 2010*

*changing the name to*

**HEALTHTECH MANAGEMENT SERVICES, INC.**

*I further certify that*

**HEALTHTECH MANAGEMENT SERVICES, INC.**

*is active on the records of the Corporation Division as of the date of this certificate.*



*In Testimony Whereof, I have hereunto set  
my hand and affixed hereto the Seal of the  
State of Oregon.*

**KATE BROWN, Secretary of State**

By

*Debra L. Virag*

**Debra L. Virag**

**February 4, 2011**

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