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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

C T CORPORATION SYSTEM

Account Number Phone

FCA000000023 (512)418-6949

: (954)208-0845

Fax Number

The email address for this business entity to be used for future 1^n . Definitely annual report mailings. Enter only one email address please.**

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN ARĞUS HEALTH SYSTEMS, INC.

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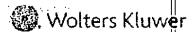
FAX COVER SHEET

ТО	
COMPANY	
FAXNUMBER	18506 76380
FROM	Ranae McGraw
DATE	2017-09-12 09:47:47 CST
RE	FW: Argus Health Systems, Inc.

COVER MESSAGE

Kaity Toon Fulfillment Specialist Fulfillment Operations CT Corporation

Team (614) 280-3338
GlobalFulfillmentTeam@wolterskluwer.com



4400 Easton Commons Way Suite 125 Columbus, Ohio 43219 www.wolterskluwer.com

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Argus Health Systems, Inc.
Name of Corporation DOCUMENT NUMBER: F04000005091
ll la l
The enclosed Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Val Lake
Name of Contact Person
DST Systems, Inc.
Firm/Company
333 West 11th Street
Address
Kansas City, MO 64105
City/State and Zip Code
vllake@dstsystems.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Vai Lake 816 435-8655
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$35.00 Filing Fee Certificate of Status \$43.75 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Callahassee, 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)	
 	5091	
——————————————————————————————————————	Document number of corporation (if known)	
Argus Health Systems, Inc.		_
(Name of corpora	ition as it appears on the records of the Department of State)	
o Delaware	3 08/31/2004	
(Incorporated under laws		_
(4-7 con	SECTION II PPLETE ONLY THE APPLICABLE CHANGES)	
(4-7-63)	THE REPLICABLE CHANGES)	
 4. If the amendment changes the name of	the corporation, when was the change effected under the laws of	
its jurisdiction of incorporation? Septen		
[
DST Pharmacy Solutions, Inc.	nent, adding suffix "corporation," "company," or "incorporated," or	_
appropriate abbreviation, if not contain	ined in new name of the corporation)	
	-	
(If new name is unavailable in Florida l	enter alternate corporate name adopted for the purpose of transacting	
business in Florida)		
	7 S	,
. If the amendment changes the period of	f duration, indicate new period of duration.	
	्रिक्ष – क्षात्र –	,
	(New duration)	,
If the amendment changes the jurisdicti	ion of incorporation, indicate new jurisdiction.	
. It will different changes are juristical	on of incorporation, indicate new jurisdiction.	
	(New jurisdiction)	
. Attached is a certificate or document of	similar import, evidencing the amendment, authenticated not more than	,
90 days prior to delivery of the applicat having custody of corporate records in	similar import, evidencing the amendment, authenticated not more than ion to the Department of State, by the Secretary of State or other official the jurisdiction under the laws of which it is incorporated.	İ
	1	
(Signature of	fa director, president or other officer - if in the hands	
of a received	or other court appointed fiduciary, by that fiduciary)	
Gregg Wm. Givens	Vice President and Treasurer	
(Typed or printed name of person s	igning) (Title of person signing)	

<u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'ARGUS HEALTH SYSTEMS,

INC.', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO

'DST PHARMACY SOLUTIONS, INC.' ON THE ELEVENTH DAY OF SEPTEMBER,

A.D. 2017, AT 9:13 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF
THE AFORESAID CERTIFICATE OF AMENDMENT IS THE TWELFTH DAY OF
SEPTEMBER, A.D. 2017.

Authentication: 203201762 Date: 09-11-17

2154129 8320 SR# 20176104085

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