

F 07000000517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

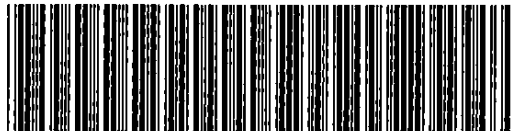
(Business Entity Name)

(Document Number)

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RECEIVED  
07 FEB 15 PM 2:45  
STATE  
CORPORATIONS  
TALLAHASSEE, FLORIDA

07 FEB 23 PM 2:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

N.C.



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 759861 4301763

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 35.00

ORDER DATE : February 14, 2007

ORDER TIME : 12:46 PM

ORDER NO. : 759861-015

CUSTOMER NO: 4301763

FOREIGN FILINGS

NAME: AMERICAN MEDREV CORP.

- CORPORATE
- LIMITED PARTNERSHIP
- LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 2914

EXAMINER: \_\_\_\_\_

*File 2nd  
Please see letter  
on 1st filing*

**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)**

F0700000517

(Document number of corporation (if known))

1. American MedRev Corp.  
(Name of corporation as it appears on the records of the Department of State)

2. Delaware (Incorporated under laws of)      3. January 29, 2007 (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? 02/14/2007

5. American Medical Review, 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)

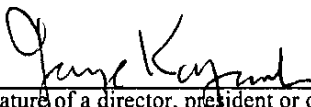
(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

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)

  
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  
George Kasparek  
(Typed or printed name of person signing)

President  
(Title of person signing)

APPROVED  
AND  
FILED  
07 FEB 23 PM 2:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

PAGE 1

## *The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "AMERICAN MEDREV CORP.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "AMERICAN MEDICAL REVIEW, INC.", THE FOURTEENTH DAY OF FEBRUARY, A.D. 2007, AT 5 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMERICAN MEDREV CORP." WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF JANUARY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



4291403 8320

070173697

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5435931

DATE: 02-15-07