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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

Fax Number

: (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

| Email | Address: | | | |
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COR AMND/RESTATE/CORRECT OR O/D RESIGN REVENUE CYCLE SOLUTIONS, INC OF AMERICA

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$35.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

AUG 2 4 2012 T. ROBERTS

8/24/2012

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COVER LETTER

| TO: | Amendment Section Division of Corporations | |
|-------------------------------|---|--|
| SUBJ | ECT: Revenue Cycle Solutions, | Inc. dibla Revenue Cycle Solutions, Inc of Americ Name of Corporation |
| DOC | UMENT NUMBER: F090000 | |
| | iclosed Amendment and fee | |
| | | oncerning this matter to the following: |
| I (Case | Teturi an correspondence co | incertaing this matter to the following. |
| | Àmanda Head | |
| | Name of Contact Po | 'erson |
| | Datharina Ordensa | · . |
| | Optimum Outcomes Firm/Compan | · · · · · · · · · · · · · · · · · · · |
| | a acres wormpy | |
| | 4524 Southlake Parkwa | ay, Suite 15 |
| | Address | |
| | | • |
| | Hoover, Alabama 3 | |
| | City/State and Zip | Code |
| | | |
| | amanda head@ mail address: (to be used for fut | |
| _ | | The second secon |
| For fur | ther information concerning t | this matter, please call: |
| | Amendo Usud | 205 > 409 0409 |
| | Amanda Head Name of Contact Person | at (205) 402-9102 Area Code & Daytime Telephone Number |
| | : | |
| Enclose | ed is a check for the following | ng amount: |
| \$3 | 5.00 Filing Fee S43.75 Fili Certificate | lling Fee & S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Pee, Certified of Status & Certified Copy (Additional copy is enclosed) |
| Amendr Division P.O. Bo | Address; nent Section n of Corporations x 6327 ssee, FL 32314 | Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahasses, 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.)

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| | 3 | | |
| | | CTION I | man |
| | (1-3 MUST I | BE COMPLETED) | 26 10 an |
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| | | 000001847 | |
| (Doc | ument humber | of corporation (if known) | 44 P |
| | · . | | A CONTRACT OF THE PARTY OF THE |
| 1 | Revenue Cvo | ele Solutions, Inc of Ame | 是 星 |
| (Name of cornoration | | on the records of the Departmen | |
| (| : | | |
| | | | 製造 5 |
| 2. Illinois | 1.0 | | lay 6th, 2009 |
| (Incorporated under laws of) | | (Date authorize | d to do business in Florida) |
| | · · | | • |
| | - 3 | | |
| | SEC | TION II | |
| (4-7 сомр | | THE APPLICABLE CHANGE | s) |
| | \$ | | • |
| 4 T64 1 4 | | | Frated and deaths love of |
| 4. If the amendment changes the name of th | e corporanoi | n, when was the change en | rected under the laws of |
| its jurisdiction of incorporation? July 20t | th, 2012 | | |
| · · · · · · | | | |
| 5. Optimum Outcomes, Inc. | 9 | | |
| (Name of corporation after the amendmen | it, adding su | ffix "corporation," "comp | pany," or "incorporated," or |
| appropriate abbreviation, if not containe | d in new nar | ne of the corporation) | |
| | · 14 | • | |
| | ; | | |
| (If new name is unavailable in Florida, ent | ier alternate (| corporate name adopted fo | or the purpose of transacting |
| business in Florida) | <i>d</i> | | |
| | 5. | | |
| 6. If the amendment changes the period of d | uration, indi- | cate new period of duration | n. |
| | | • | • |
| | : | | |
| | (Navi | duration) | <u></u> |
| | (1464) | udration) | |
| 7. If the amendment changes the jurisdiction | of incorpora | ation, indicate new jurisdi | ction. |
| • | 4 | • | |
| | . | risdiction) | |
| · 4 | r = | | |
| Attached is a certificate or document of si 90 days prior to delivery of the application having custody of corporate records in the | milar import 1 to the Depa jurisdiction | , evidencing the amendment frument of State, by the Se | ent, authenticated not more than cretary of State or other official |
| the state of the s | · Jurisdionoli | MINON MIN IN ALL DAY ALIHOTT I | in monthormore |
| Munit | · | | |
| (Signature of a director, president or other | officer - if in the | no hands | |
| of a receiver or other court appointed fidu- | ciary, by that fi | iduciary) | |
| V Mishael Innovice | | Descio | lent & CEO |
| Michael Jacoulot (Typed or printed name of person sign | ing) | | person signing) |
| (23 ham at Krittian immin on harnors pilbe | 3 | / va } | · · · · · · · · · · · · · · · · · · · |

File Number

6244-703-6



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

ARTICLES OF AMENDMENT TO THE ARTICLES OF INCORPORATION WERE FILED IN THIS OFFICE ON JULY 20, 2012, CHANGING NAME FROM REVENUE CYCLE SOLUTIONS, INC. TO OPTIMUM OUTCOMES, INC.**



Authentication #: 1222901025
Authenticate at: http://www.cyberdrivelillnols.com

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 16TH

day of AUGUST

A.D.

2012

SECRETARY OF STATE

260988998 90:00 2102/42/80