

From:

F12000000226

03/27/2014 03:51

#894 P.001/004

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H14000072673 3)))



H140000726739457

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : NATIONAL CORPORATE RESEARCH, LTD.
Account Number : T20000000088
Phone : (800) 221-0102
Fax Number : (800) 944-6607

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

Email Address: _____

RECEIVED

14 MAR 27 PM 4:55

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
MAIL ROOM

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
INTEGRA HEALTH MANAGEMENT INC**

Certificate of Status	0
Certified Copy	0
Page Count	3
Estimated Charge	\$35.00

Name Change

Electronic Filing Menu

Corporate Filing Menu

Help

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

3/26/2014

((H14000072673 3)))

MAR 28 2014

T. CARTER

14 MAR 27 AM 8:50

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

From:

03/27/2014 03:52

#814 P.004/004

850-817-6381

3/27/2014 3:55:21 PM PAGE

1/001

Fax Server



March 27, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

INTEGRA HEALTH MANAGEMENT INC
E-FILENATIONAL CORPORATE RESEARCH**
OWINGS MILLS, MD 21117

SUBJECT: INTEGRA HEALTH MANAGEMENT INC
REF: F12000000226

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The amendment must include the date the name change was effected in the home state.

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) 245-6050.

Tina D Carter
Regulatory Specialist

FAX Aud. #: H14000072673
Letter Number: 614A00006610

RECEIVED

14 MAR 27 PM 4:55

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

From:

03/27/2014 03:51

#814 P.002/004

((H14000072673 3)))

**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)**

F12000000228

(Document number of corporation (if known))

1. Integra Health Management Inc.

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

2. Maryland

(Incorporated under laws of)

3. 01/17/2012

(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? 2/5/2014

5. MD Health Holdings, 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.

N/A

(New duration)

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

N/A

(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.

Mihcael K. Yuhas
(Signature of a director, president or other officer - If in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Mihcael K. Yuhas

(Typed or printed name of person signing)

President

(Title of person signing)

((H14000072673 3)))

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
14 MAR 27 AM 8:50

From:

03/27/2014 03:51

#814 P.003/004

((H14000072673 3)))

STATE OF MARYLAND
Department of Assessments and Taxation

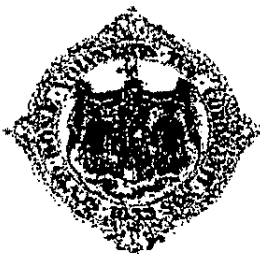
I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT ACCORDING TO THE RECORDS OF THIS DEPARTMENT ARTICLES OF AMENDMENT OF INTEGRA HEALTH MANAGEMENT, INC. CHANGING ITS NAME TO MD HEALTH HOLDINGS, INC. WERE RECEIVED AND APPROVED FOR RECORD BY THIS DEPARTMENT ON FEBRUARY 5, 2014.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS MARCH 25, 2014.

Paul B. Anderson

Paul B. Anderson
Charter Administrator



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 0008785171
MRS (Maryland Relay Service) (800) 735-2258 TTY/Voice
Fax (410) 333-7097

CRT08T

((H14000072673 3)))