Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

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Account Name : VCORP SERVICES, LLC

Account Number : 120080000067 Phone : (845)425-0077

: (845)818-3588 Fax Number

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

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN PATIENTFINDER, INC.

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C. GOLDEN

Corporate Filing Menu JUL 1 9 2017 Help Electronic Filing Menu

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	(Pursuant to s	s. 607.1504, F.\$.)	
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	(Document manager	(1) 1210 (1)	
PatientFinder, Inc.			02 CF
1	Name of corporation as it appears of	n the records of the Department of Stat	
 .		May 10, 2017	
2. Delaware		3. May 19, 2017 (Date authorized to do l	and the Floriday
(Incorpor	ated under laws of)	(Date authorized to do t	ousiness in rionda)
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	(4-7 COMPLETE ON); 1	HE AFFLICABLE CHANGES)	
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4. It the amendment change	une 27 2017	a, when was the change effected	diddi dio iawa oi
its jurisdiction of incorp	oration?		
5. Healthcare Sales Enablement.	, Inc.		
5. Name of comparation all	ter the amendment adding six	ffix "corporation," "company,"	or "incorporated." or
appropriate abbreviation	n, if not contained in new nar	ne of the corporation)	
- FFF	•		
7-2-11-1			vienage of transacting
(If new name is unavailate business in Florida)	ble in Florida, enter alternate	corporate name adopted for the p	outhose of fransacting
ousiness in Fronda)			
6 If the amondment change	es the period of duration, indi	cate new period of duration	
o. II the amendment change	es the period of duration, indi-	cate new period of duration.	
	New	duration)	
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7. If the amendment change	es the jurisdiction of incorpor	ation, indicate new jurisdiction.	
	* *	urisdiction)	
Attached is a certificate 90 days prior to delivery	or document of similar import of the application to the Dep	t, evidencing the amendment, au artment of State, by the Secretar a under the laws of which it is ind	thenticated not more than y of State or other official
naving custody of corpor	tate recoles in the Julisciction		
		2) / //	-
	(Signature of a director, president of a receiver or other court as	dent or other officer - if in the hands ppointed fiduciary, by that fiduciary)	
David Thornton	of a feed set of other court at	Chief Executive Office	er .
	d name of person signing)	(Title of person	signing)
(1) pod ot printer	~ ········ v* p *·· * ·· · · · · · · · · · · · · · ·		_ _ -

Delaware The First State

Page 1

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

DELAMARE, DO HEREBY CERTIFY THAT THE SAID "PATIENTFINDER, INC.",

FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO

"HEALTHCARE SALES ENABLEMENT, INC." ON THE TWENTY-SEVENTH DAY OF

JUNE, A.D. 2017, AT 9:29 O'CLOCK A.M.

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 SAID "HEALTHCARE SALES ENABLEMENT, INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF MAY, A.D. 2017.

Authentication: 202905531

Date: 07-18-17