F94000003357 Transcend

July 29, 1997

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Attn: Susan Payne PERSONAL & CONFIDENTIAL

Case Management, Inc.

Subject: Transcend Case Management name change



Attached is the form that you faxed to me to fill out. Sorry about all of the confusion regarding this matter. Hopefully you have all of the paperwork that you need from me. If you have any more questions please give me a call.

Thanks for all of your help.

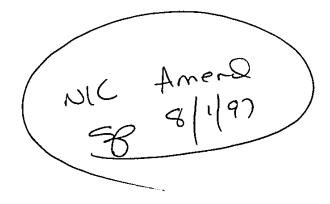
700002256617---1 -08/04/97--01107--016 *****35.00 ******35.00

Sincerely,

Mary M. We grin

Mary A. Virgilio Director of Finance

15 28 S





FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 27, 1997

SULLIVAN HEALTH & REHABILITATION MANAGEMENT, INC. 3353 PEACHTREE ROAD, N.E. SUITE 1000 ATLANTA, GA 30326 US

SUBJECT: SULLIVAN HEALTH & REHABILITATION MANAGEMENT, INC. Ref. Number: F94000003354

Please be advised, we have received your document for the above corporation; however, the document <u>has not been filed</u> and is being returned for the following:

The records of the Division of Corporations do not reflect a name change has been filed for this corporation as indicated on the enclosed annual report. This report cannot be filed under the new name until an amendment has been filed. For your convenience, enclosed are the instructions and/or forms to change the name. Please return the amendment and annual report together to the address indicated.

The amendment filing fee is \$35.

TO AVOID THE \$385.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

After the corrections have been made, please return the report to: Division of Corporations, Annual Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (904) 488-9000.

ANNUAL REPORTS SECTION

Letter number: 697A00028628

/ah



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 20, 1997

Mary Virgilio Sullivan Health & Rehabilitation Mgmt. 3353 Peachtree Road, N.E., Suite 1000 Atlanta, GA 30326

SUBJECT: SULLIVAN HEALTH & REHABILITATION MANAGEMENT, INC. Ref. Number: F94000003354

We have received your document for SULLIVAN HEALTH & REHABILITATION MANAGEMENT, INC. and check(s) totaling \$35.00. However, your check(s) and document are being returned for the following:

Per our phone conversation, I am returning the correct form for filing an amendment for a foreign corporation qualified in Florida. Please also note that a certificate evidencing the name change no more than 90 days old should accompany the application. You can return the check for \$35 with your documents.

Please accept my apologies for the confusion regarding this name change and annual report. Should the annual report be returned back to you (which it probably will be) simply return it to me at the following address (no late fee will be assessed) - SUSAN PAYNE -PERSONAL & CONFIDENTIAL, DIV. OF CORP., P. O. BOX 6327, TALLAHASSEE, FL. 32314.

If you have any questions concerning this matter, please either respond in writing or call (904) 487-6901.

Susan Payne Senior Section Administrator

Letter Number: 297A00026969

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)

1. Sullivan Health & Rehabilitation Management, Inc.
Name of corporation as it appears on the records of the Department of State.
2. <u>Georgia</u> 3. June 27, 1994
Incorporated under laws of 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? June 18, 1997
Name changed to Sullivan Health Management Services, Inc. on 2/27/97
5. Name changed to Transcend Case Management, Inc. on 6/18/97 Name of corporation after the amendment, adding suffix "corporation" "company" or "incorporated," or appropriate abbreviation, if not
Name of corporation after the amendment, adding suffix "corporation" "company" or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation.
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.
P S S S S S S S S S S S S S S S S S S S
New Jurisdiction 7/29/97 Signature Todd Mann Typed or printed name President Title

Secretary of State Corporations Division Suite 315, West Tower 2 Martin Tuther King Ir. Ar. Atlanta, Georgia 30334-1530

DOCKET NUMBER : 971960536

CONTROL NUMBER : 8211757

DATE INC/AUTH/FILED: 10/01/1982

JURISDICTION : GEORGIA

PRINT DATE : 07/15/1997

FORM NUMBER : 215

TAMMY FREILICH
SMITH GABRELL & RUSSELL
3343 P'TREE RD STE 1800
ATLANTA GA 30326

CERTIFIED COPY

I, Lewis A. Massey, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that the attached documents are true and correct copies of documents filed under the name of

TRANSCEND CASE MANAGEMENT, INC. A DOMESTIC PROFIT CORPORATION

Said entity was formed in the jurisdiction set forth above and has filed in the office of the Secretary of State on the date set forth above the original document of which copies are attached.

This certificate is issued pursuant to the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated herein.

Lewis a. Massey
SECRETARY OF STATE

Secretary of State Corporations Division Suite 315, West Cower 2 Martin Tuther King Ir. Dr. Atlanta, Georgia 30334-1530

DOCKET NUMBER: 971820101 CONTROL NUMBER: 8211757 EFFECTIVE DATE: 06/18/1997 REFERENCE: 0064

PRINT DATE : 07/01/1997

FORM NUMBER : 611

SMITH, GAMBRELL & RUSSELL, LLP TAMMY B. FREILICH 3343 PEACHTREE ROAD, N. E., STE. 1800 ATLANTA GA 30326-1010

CERTIFICATE OF NAME CHANGE AMENDMENT

I, Lewis A. Massey, the Secretary of State and the Corporation Commissioner of the State of Georgia, do hereby certify under the seal of my office that

SULLIVAN HEALTH MANAGEMENT SERVICES, INC. A DOMESTIC PROFIT CORPORATION

has filed articles of amendment in the office of the Secretary of State changing its name to

TRANSCEND CASE MANAGEMENT, INC.

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles of amendment.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on the date set forth above.

Jewis A. Massey

LEWIS A. MASSEY

SECRETARY OF STATE



ARTICLES OF AMENDMENT

OF

SULLIVAN HEALTH MANAGEMENT SERVICES, INC.

I.

The name of the Corporation is Sullivan Health Management Services, Inc.

II.

The Articles of Incorporation of the Corporation are hereby amended by deleting Article I thereof in its entirety and substituting in lieu thereof the following Article I:

"I.

The name of the Corporation is Transcend Case Management, Inc."

Ш.

The amendment set forth in Article II of these Articles of Amendment was adopted on June 10, 1997.

IV.

Adoption of the amendment has been duly approved by action of the Corporation's Board of Directors and Shareholders in accordance with O.C.G.A. § 14-2-1003.

IN WITNESS WHEREOF, the Corporation has caused these Articles of Amendment to be executed on this 2 day of June, 1997.

SULLIVAN HEALTH MANAGEMENT SERVICES, INC.

David W. Murphy Assistant Secretary

BSR (I)

SECRETARY OF STATE

Secretary of State Business Information and Services Suite 315, West Tower 2 Martin Tuther King Ir. Ar. Atlanta, Georgia 30334-1530

DOCKET NUMBER: 970430864 CONTROL NUMBER: 8211757 EFFECTIVE DATE: 02/07/1997 REFERENCE: 0064 PRINT DATE: 02/12/1997 FORM NUMBER: 611

SMITH, GAMBRELL & RUSSEL!, LLP MARIA T. HAUSER 3343 PEACHTREE RD., N. E., STE. 1800 ATLANTA GA 30326-1010

CERTIFICATE OF NAME CHANGE AMENDMENT

I, the Secretary of State and the Corporation Commissioner of the State of Georgia, do hereby certify under the seal of my office that

SULLIVAN HEALTH & REHABILITATION MANAGEMENT, INC. A DOMESTIC PROFIT CORPORATION

has filed articles of amendment in the office of the Secretary of State changing its name to

SULLIVAN HEALTH MANAGEMENT SERVICES, INC.

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles of amendment.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on the date set forth above.

Levis A. Massey

SECRETARY OF STATE

ARTICLES OF AMENDMENT

OF

SULLIVAN HEALTH & REHABILITATION MANAGEMENT, INC.

L

The name of the Corporation is Sullivan Health & Rehabilitation Management, Inc.

II.

The Articles of Incorporation of the Corporation shall be amended by deleting Article I thereof in its entirety and substituting the following in lieu of Article I:

٩Ţ

The name of the Corporation is Sullivan Health Management Services, Inc."

Ш.

The amendment set forth in Article II of these Articles of Amendment was adopted on January 21, 1997.

IV.

The amendment was adopted by action of the Corporation's Board of Directors and sole Shareholder in order to adopt the amendment.

IN WITNESS WHEREOF, the Corporation has caused these Articles of Amendment to be executed by Larry G. Gerdes, President of the Corporation, on this 22 day of January, 1997.

SULLIVAN HEALTH & REHABILITATION MANAGEMENT SERVICES, INC.

Com my manifestation of the property of the state of the

Larry G. Gerdes

Taily Control

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SECRETARY OF STATE

Secretary of State

Business Bervices und Regulation

Juite 308, West Cower 2 Maria Luber Ring Je. Pr. Atlanta, Ceorgia 20336 DOCKET NUMBER
CHARTER NUMBER
DATE INCORPORATED
DATE AMENDED
EXAMINER
TELEPHONE

88126592 8811757 10/01/82 105/05/88 1 M. MATEEN

MAILED TO: CARTER & WILLIAMS ATTN: RUSSELL D. CARTER 315 W. PONCE DE LEON AVENUE, 8755 DECATUR, GA. 30030

CERTIFICATE OF AMENDMENT

I, MAX CLELAND, Secretary of State and the Corporations Commissioner of the State of Georgia do hireby certify, under the seal of my office, that the articles of lincorporation of

"DOROTHY SULLIVAN & ASSOCIATES, INC."

Changed its mame to
"SULLIVAN HEALTH & REHABILITATION MANASEMENT, INC."

have been duly assended under the laws of the State of Smorgia, by:
the filing of articles of assendment in the office of the Secretary
of State and the fees therefor paid, as provided by law, and that
attached hereto is a true and correct copy of said articles of
assendment.

WITNESS, my hand and official smal, in the City of Atlanta and the State of Georgia on the date set forth below.

DATE: MAY 10, 1988 FORM A3(3/87)

Max Clelan

MAX CLELAND SECRETARY OF STATE

II. WAYNE HOWELL
DEPUTY SECRETARY OF STATE

SECURITIES 656-2894

CEMETERIES 656-3079 CORPORATIONS 656-2817 CORPORATIONS HOT-LINE 404-656-2222 Outside Metro-Atlanta

ARTICLES OF AMENDMENT

OF DOROTHY SULLIVAN & ASSOCIATES , The

The shareholders of Dorothy Sullivan & Associates, a corporation organized and existing under the laws of the State of Georgia, did on this the day of the Articles of Incorporation of said Corporation as follows:

Paragraph 1 of the Articles of Incorporation is changed to reflect the new name of the Corporation as follows: Sullivan Health & Rehabilitation Management, Inc.

Said amendment was adopted by the unanimous vote of the holder of all of the outstanding shares entitled to vote thereon.

From and after the effective date of the within Articles of Amendment, the name of the Corporation is and shall be: Sullivan Health & Rehabilitation Management, Inc.

IN WITNESS WHEREOF, Dorothy Sullivan & Associates has caused these Articles of Amendment to be executed and its corporate seal to be affixed and has caused the foregoing to be attested, all by its duly authorized officers, on this day of 1988.

DOROTHY SULLIVAN & ASSOCIATES

ATTEST:

Timoth Sullivan

Secretary

Bv:

Dorothy Syllivan

president

W. STATE

2 417# %

DIRECTORS OF DOROTHY SULLIVAN & ASSOCIATES

CONSENT TO TAKE ACTION WITHOUT MEETING

Pursuant to the authority contained in Section 14-2-149 of the Official Code of Georgia Annotated, the undersigned being all of the Directors of Dorothy Sullivan & Associates, a Georgia Corporation, do hereby take and adopt the following action in writing without meeting this the day of

WHERE'S, a trademark search has revealed a conflict with the name "Dorothy Sullivan & Associates" and no conflict with the name "Sullivan Health & Rehabilitation Management, Inc.";

BE IT RESOLVED, the officers of the Corporation are hereby directed to execute articles of Amendment to change the name of the Corporation to "Sullivan Health & Rehabilitation Management, Inc."

RESOLVED FURTHER, that the Secretary is hereby directed to attach a copy of the above Articles of Amendment hereto, thereby making such copy a part of the Corporate records.

DIRECTORS:

Dorothy Syllivan

Thomas H. Campbel

Timothy Sullivan

James B. Sullivan

(SEAL)

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Secretary of State

Suite 306, Mest Comer 2 Martin Auther Ming Br. Dr. Atlanta, Georgia 20334 REGUE STED BY 2

RUSSELL CARTEN
755 FIRST NATIONAL BANK BLOG
DECATUR GA 30030

CENTIFICATE DATE
DUCKET NUMBER

EXAPINEN Telephuné 1 03/24/68

680885 '

E SANDHA JEAN SHUN

404-656-1772

CCHPURATE NAME CERTIFICATE

THE RECORDS OF THE SECRETARY OF STATE HAVE BEEN REVIEWED AND THE FULLDAING NAME IS NOT IDENTICAL TO, AND APPEARS TO HE DISTING GUISHABLE FROM. THE NAME OF ANY OTHER EXISTING CORPORATION OR PROFESSIONAL ASSOCIATION ON FILE PURSUANT TO THE APPLICABLE PROVISIONS OF THE GEORGIA LAWS RELATING TO CORPORATIONS AND PROFESSIONAL ASSOCIATIONS (TITLE 14 OF THE OFFICIAL CODE OF GEORGIA ANNOTATED).

"SULLIVAM HEALTH & HEMADILITATION MANAGEMENT, INC."

THIS CERTIFICATE SMALL BE VALID FOR A PERIOD OF THU DELENDAR MUNTES FOR PROFIT AND NUMEROFIT CORPORATIONS AND PROFESSIONAL ASSOCIATIONS (OF, FF, DN, FN, & PA) AND SIX CALENDAR MONTHS FOR BANKS (BK) FROM THE DATE OF THIS CERTIFICATE. PLEASE SUBMIT THE DRIGINAL CERTIFICATE (MMITE COPY) WITH THE ARTICLES OF INCORPORATION.

THE SECRETARY OF STATE MAY EXTEND THE CERTIFICATE FOR DNE PERIOD IF THE APPLICANT SUBMITS A \$20,00 FEE AND A WRITTEN REQUEST EXPLAINING WHY THE EXTENSION IS REQUESTED.

MAN CLELAND SECRETARY OF STATE

du Hours

H. WAYNE HOWELL DEPUTY SECRETARY OF STATE





I, David B. Poythress, Secretary of State of the State of Georgia, do hereby certify that

"DOROTHY SULLIVAN & ASSOCIATES, INC."

has been duly incorporated under the laws of the State of Georgia on the lst October 19 ?? by the filing of articles of incorporation in the office of the day of Secretary of State and the fees therefor paid, as provided by law, and that attached hereto is a true copy of said articles of incorporation.

> IN TESTIMONY WHEREOF, I have hereunto net my hand and attived the weal of my office, at the Capitol, in the City of Manta, this of our ford time Thousand Nine Hundred and Tighty and of the Independence of the United States

of America the Two Hundred and

ARTICLES OF INCORPORATION

DOROTHY SULLIVAN & ASSOCIATES, INC.

ONE

The name of the corporation is: "DOROTHY SULLIVAN & ASSOCIATES, INC."

TWO

The corporation is organized pursuant to the provisions of the Georgia Business Corporation Code.

THREE

The corporation shall have perpetual duration.

FOUR

The corporation is a corporation for profit and is organized for the following purposes:

- (a) to provide medical and vocational rehabilitation management services; and
- (b) to carry on any other lawful business, whether or not connected with or related to any business set forth in subparagraph (a) above, r. it specifically prohibited to corporations under applicable laws of the State of Georgia.

<u> Pive</u>

The corporation shall have authority, exercisable by its Board of Directors, to issue up to 1,000 shares of common stock, \$1.00 par value.

SIX

The corporation shall not commence business until it shall have received at least Pive Hundred Dollars (\$500.00) consideration in payment for the issuance of shares of stock.

SEVEN

The initial registered office of the corporation shall be at 4019 Plintridge Drive, Stone Mountain, Georgia 30083. The initial registered agent of the corporation at such address shall be James Brian Sullivan, whose consent to such appointment is attached to these Articles of Incorporation.

EIGHT

The initial Board of Directors shall consist of one (1) member whose name and address are as follows:

Dorothy C. Sullivan 4019 Plintridge Drive Stone Mountain, Georgia 30083

NINE

The name and address of the incorporator is as follows:

W. Randy Eaddy, Esq. Trotter, Bondurant, Miller & Hishon 2200 First Atlanta Tower Two Peachtree Street, N.W. Atlanta, Georgia 30383 いいとなっているのとのなっというというというないのでは、

TEN

No shareholder shall have the preemptive right to acquire unissued shares of the corporation.

<u>eleve</u>n

The Board of Directors shall have the authority to make, from time to time, distributions of assets to the shareholders out of the capital surplus of the corporation, to the extent otherwise permitted by law.

IN WITNESS WHEREOF, the undersigned executes these Articles of Incorporation this lst day of October, 1982.

W. Kandy Saddy
W. Randy Eaddy
Incorporator

CONSENT TO APPOINTMENT AS REGISTERED AGENT

TO:

David E. Poythress, Esquire Secretary of State 214 State Capitol Building Atlanta, Georgia 30.34

I, James Brian Sullivan, do hereby consent to serve as registered agent in Georgia for Dorothy Sullivan & Associates, Inc., to be incorporated under the laws of the State of Georgia.

James Brian Sullevin

Executed as of this 30 #hday of September, 1982.

Address of Registered Agent:

4019 Plintridge Drive Stone Mountain, Georgia 30083



I. Quaid B. Pouglherss, Secretary of Nate of the State of Georgia, do beerby cretify that

learned was a distinguist resemble of the resting of the section of the state of the following proposed described proposed described the state of

"DOROTHY BULLIVAN & ASSOCIATES, INC."

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