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JUN - 6 2014

R. WHITE



OH SERVICE COMPANY'			
ACCOUNT NO. :	12000000195		
REFERENCE :	144108 4338256		
AUTHORIZATION :			
COST LIMIT :	\$ 35.00		
	*FILE SECOND****		
ORDER TIME : 11:31 AM			
ORDER NO. : 144108-040			
CUSTOMER NO: 4338256			
FOREIGN FILINGS			
NAME: FORTE, INC.			
XX CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY			
XXXX AMENDMENT			
PLEASE RETURN THE FOLLOWING AS PRO	OF OF FILING:		
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDI	NG		
CONTACT PERSON: Emily Gray EXT	# 62925		

EXAMINER:

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)

F96000000020	
(Docum	nent number of corporation (if known)
1. Forte, Inc.	
(Name of corporation as	s it appears on the records of the Department of State)
2. ^{Texas}	3. 12-29-1995
(Incorporated under laws of)	3. 12-29-1995 (Date authorized to do business in Florida)
(4-7 comple	SECTION II TE 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? May 14, 20	014
5. WellComp Managed Care Services, Inc.	
(Name of corporation after the amendment, appropriate abbreviation, if not contained	, adding suffix "corporation," "company," or "incorporated," or in new name of the corporation)
(If new name is unavailable in Florida, enter business in Florida)	r alternate corporate name adopted for the purpose of transacting
6. If the amendment changes the period of dur	ration, indicate new period of duration.
	(New duration)
7. If the amendment changes the jurisdiction of	of incorporation, indicate new jurisdiction.
	(New jurisdiction)
 Attached is a certificate or document of sin 90 days prior to delivery of the application having custody of corporate records in the j 	nilar import, evidencing the amendment, authenticated not more than to the Department of State, by the Secretary of State or other official jurisdiction under the laws of which it is incorporated.
Peter E. Lind	
(Signature of a director, president or other o of a receiver or other court appointed fiducing	
Peter E. Lind	Secretary
(Typed or printed name of person signi	(Title of person signing)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Nandita Berry Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that on May 16, 2014, FORTE, INC., a Domestic For-Profit Corporation (file number 137397400), changed its name to WellComp Managed Care Services, Inc.

> In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on May 19, 2014.



NANDITA BERRY

Nandita Berry Secretary of State