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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FILED

CORPORATION NAME(S) &amp; DOCUMENT NUMBER(S) (if known):

1

Orthopedic Medical Networks of America

(Corporation Name)

(Document #)

2

(Corporation Name)

(Document #)

3

(Corporation Name)

(Document #)

Must have file date of 8/20/97

4

(Corporation Name)

(Document #)

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NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R A, Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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Examiner's Initials

8/25  
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Change  
C.C.

# 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. Orthopedic Medical Networks of America, Inc.  
Name of corporation as it appears on the records of the Department of State.
2. Delaware  
Incorporated under laws of
3. January 23, 1997  
Date authorized to do business in Florida

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA


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### 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? August 5, 1997
5. OMNA Medical Partners, 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.
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.  
--  
New Jurisdiction

  
 Signature  
David Peck  
 Typed or printed name

8/20/97  
 Date  
President  
 Title

*State of Delaware*  
*Office of the Secretary of State*


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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "ORTHOPEDIC MEDICAL NETWORKS OF AMERICA, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "OMNA MEDICAL PARTNERS, INC.", THE FIFTH DAY OF AUGUST, A.D. 1997, AT 9 O'CLOCK A.M.



2613461 8320

971278424

  
Edward J. Freel, Secretary of State

AUTHENTICATION:

8614453

DATE:

08-20-97