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To:

Division of Corporations

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From:

Account Name : CSH SERVICES, LLC

Account Number : 120070000160 Phone : (800)494-3124

Fax Number : (561)455-9885

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

HYGEA BILLING AND MANAGED SERVICES, LLC

Certificate of Status	0	
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## HYGEA BILLING AND MANAGED SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

`		<b>,</b>	,,		
The Articles of Organization for this Limited I	Liability Company	were filed on	03/14/2008	and and	assigned
Florida document number L08000026929			,	70	ó 📶
<del></del>					4
This amendment is submitted to amend the fol	llowing:				7
	-				No The state of th
A. If amending name, enter the new name	<u>of the limited liab</u>	ility company	here:		
The new name must be distinguishable and end w "L.L.C."	ith the words "Limi	ted Liability Co	empany," the designati	on "LLC" or th	ne abbieviation
Enter new principal offices address, if applicable:		8136 OKEECHOBEE BLVD.			
(Principal office address MUST BE A STREET ADDRESS)		WEST PALM BEACH FLORIDA 33411			
Enter new mailing address, if applicable:		8136 OKEECHOBEE BLVD			
(Mailing address MAY BE A POST OFFICE BOX)		WEST PALM BEACH FLORIDA 33411			
	<u>_</u>				
registered agent and/or the new registered of New Registered Agent:	WANG CAPIT	-			
New Registered Office Address:	8136 OKEECHOBEE BOULEVARD				
New Izegister Other Address.			(Enter Florida stree		
	WEST PALM	BEACH	الشداة	a 33411 (Zip C	
	WEO! ! PREMI	(City)	, F10F10	Zip C	ode)
New Registered Agent's Signature, if changing	Registered Agent:	• .		•	
I hereby accept the appointment as register the provisions of all statutes relative to the accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	proper and comp sistered agent as p registered office	lete performat provided for it	nce of my duties, an n Chapter 608, F.S.	nd I am famili Or, if this do	ar with and ecument is
	(if Cha	nging itegistered	i Agent, <u>Signature of is</u>	ew Registeren A	Ecit()
	Page 1	of 2	74.0800	1000059	12-3

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

### 18000000592.3

MGR = Manager

MGRM = Managing Member

**Title** <u>Name</u> Address Type of Action MGRM Hygea Health Network, Inc. 2900 GLADE CIRCLE, SUITE 500 **≝** Add WESTON FL 33327 US Remove Add Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Article V - Manager / Member Detail Please update the ZIP CODE for WANG CAPITAL to 33411 Dated January 02 2009 Signature of a member or authorized representative of a member Shahmir Quraeshi Typed or printed name of signee

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74.08000000592.3.