

MD10000000311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

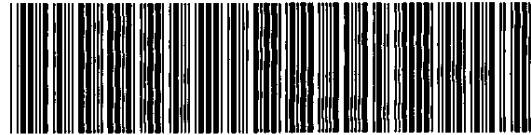
Special Instructions to Filing Officer:

**L. SELLERS**

NOV 24 2010

**EXAMINER**

Office Use Only



900187848369

900187848369  
11/23/10--01021--010 \*\*25.00

**FILED**  
10 NOV 23 PM 4:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**MERZBACH**  
**LAW OFFICE, P.C.**  
Attorneys at Law

73 State Street  
Rochester, New York 14614  
T: (585) 454-3030  
F: (585) 454-3044

CONCENTRATING IN BUSINESS LAW

j.lennon@merzbachlaw.com  
direct dial: (585) 278-9354

November 7, 2010

Registration Section  
Division of Corporations  
Clifton Bldg.  
2661 Executive Center Circle  
Tallahassee, FL 32301

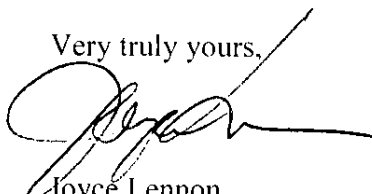
Re: Certificate of Amendment – Practiceworks Systems, LLC

Dear Div. of Corporations:

I enclose herewith an original executed Certificate of Amendment changing the name of the Georgia foreign LLC from Practiceworks Systems, LLC to Carestream Dental LLC along with a copy of the amendment for stamping and return and a check payable to the Florida Dept of State in the amount of \$25.00 for the statutory fee for filing. I also enclose a certificate from the Georgia Department of State accepting the name change in Georgia and a self-addressed stamped envelope for the return of a stamped copy of the Amendment.

Please contact me if you require any further documentation in order to file the amendment.

Very truly yours,



Joyce Lennon  
Paralegal

/jl  
Encs.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PRACTICEWORKS SYSTEMS, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOYCE LENNON

Name of Person

CARESTREAM HEALTH, INC.

Firm/Company

150 VERONA ST.

Address

ROCHESTER, NY 14608

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOYCE LENNON

Name of Person

at ( 585 )

278-9354

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-3 must be completed)**

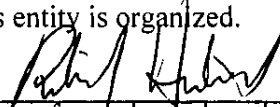
1. Name of limited liability company as it appears on the records of the Florida Department of State: PRACTICEWORKS SYSTEMS, LLC
2. Jurisdiction of its organization: GEORGIA
3. Date authorized to do business in Florida: 2/7/2001

**SECTION II (4-7 complete only the applicable changes)**

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 9/1/2010
5. New name of the limited liability company: CARESTREAM DENTAL LLC  
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration:  
\_\_\_\_\_
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:  
\_\_\_\_\_
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: \_\_\_\_\_
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

  
Signature of a member or the authorized representative of a member

RICHARD S. HIRSCHLAND, MANAGER

Typed or printed name of signee

**Filing Fee: \$25.00**

**FILED**  
10 NOV 23 PM 4:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# STATE OF GEORGIA

## Secretary of State

Corporations Division

315 West Tower

#2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

## CERTIFICATE OF AMENDMENT NAME CHANGE

I, **Brian P. Kemp**, the Secretary of State and the Corporations Commissioner of the State of Georgia, hereby certify under the seal of my office that

**PRACTICEWORKS SYSTEMS, LLC**  
a Domestic Limited Liability Company

has filed articles/certificate of amendment in the Office of the Secretary of State on **08/26/2010** changing its name to

**CARESTREAM DENTAL LLC**

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/ certificate of amendment.

WITNESS my hand and official seal in the City of Atlanta  
and the State of Georgia on August 26, 2010



Brian P. Kemp  
Secretary of State

**CERTIFICATE OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF  
PRACTICEWORKS SYSTEMS, LLC**

Under Section 14-11-210 of the O.C.G.A.

FIRST: The name of the limited liability company as it appears on the index of names in the Department of State is: **PRACTICEWORKS SYSTEMS, LLC.**

SECOND: The date the articles of organization were filed with the Georgia Secretary of State is January 23, 2001.

THIRD: The name of the limited liability company is changed to: **CARESTREAM DENTAL LLC.**

FOURTH: The effective date for the name change is September 1, 2010.

Dated: August 25<sup>th</sup>, 2010

  
Richard S. Hirschland, Manager

2010 AUG 26 PM 5:23  
SECRETARY OF STATE  
CORPORATIONS DIVISION

(M.A.) 0002443

State of Georgia  
Expedite Name Change 1 Page(s)



T1023910519