

M03000003856

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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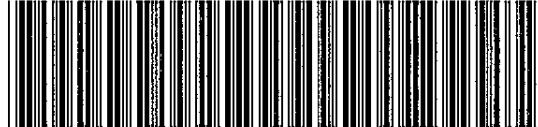
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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04 FEB -6 AM 10:14

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

BK



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032  
REFERENCE : 401588 5155900  
AUTHORIZATION : *Patricia Pigute*  
COST LIMIT : \$ 25.00

FILED  
04 FEB -6 10 14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : January 20, 2004  
ORDER TIME : 2:40 PM  
ORDER NO. : 401588-015  
CUSTOMER NO: 5155900  
CUSTOMER: Stuart Soberman, Esq.  
Maxim Healthcare Services,  
7080 Samuel Morse Drive  
Columbia, MD 21046

FOREIGN FILINGS

NAME: MHS MEDICAL SOLUTIONS, LLC

XX ☐ PROFIT ☐ CORPORATE  
☐ NON-PROFIT ☐ LIMITED PARTNERSHIP

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
XX ☐ PLAIN STAMPED COPY  
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 2914

EXAMINER: \_\_\_\_\_

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

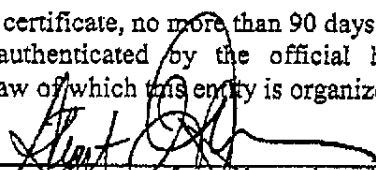
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FEB - 6 AM 11:14  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**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: MHS Medical Solutions, LLC
2. Jurisdiction of its organization: Maryland
3. Date authorized to do business in Florida: November 18, 2003

**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? January 21, 2004
5. New name of the limited liability company: CareMax Medical Resources, 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

Stuart L. Soberman, Authorized Representative  
Typed or printed name of signer

Filing Fee: \$25.00

**STATE OF MARYLAND**  
**Department of Assessments and Taxation**

I, PAUL ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO RIGHTS OF LIMITED LIABILITY COMPANIES OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT CAREMAX MEDICAL RESOURCES, LLC IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

I FURTHER CERTIFY THAT THE ATTACHED IS A COMPLETE LIST OF ALL DOCUMENTS RELATING TO THE LIMITED LIABILITY COMPANY WHICH HAVE BEEN RECEIVED AND APPROVED FOR RECORD WITH THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION.

SEE ATTACHED LIST FOR THE LIST OF ALL DOCUMENTS ON RECORD.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JANUARY 30, 2004.

*Paul B. Anderson*

Paul B. Anderson  
Charter Division



FEB 05

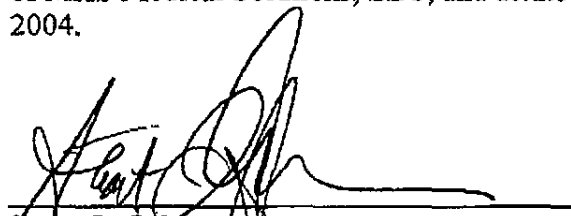
**ARTICLES OF AMENDMENT**  
**OF**  
**MHS MEDICAL SOLUTIONS, LLC**

**FIRST:** The name of the Maryland Limited Liability Company is MHS Medical Solutions, LLC.

**SECOND:** The Articles of Organization of MHS Medical Solutions, LLC are hereby amended as follows:

"The name of the limited liability company is CareMax Medical Resources, LLC."

**IN WITNESS WHEREOF**, the undersigned has executed these Articles of Amendment of MHS Medical Solutions, LLC, and acknowledges them to be his act, this 20<sup>th</sup> day of January, 2004.

  
\_\_\_\_\_  
Stuart L. Soberman  
Authorized Person

After filing, please return to:

Stuart L. Soberman, Esq.  
7080 Samuel Morse Drive  
Columbia, MD 21046

FEB 1  
LLC

## ARTICLES OF ORGANIZATION OF

2003 OCT 27 PM 3:50

### MHS MEDICAL SOLUTIONS, LLC

**FIRST:** The undersigned, being at least eighteen (18) years of age, and being authorized to execute and file these Articles of Organization, hereby forms a limited liability company pursuant to the laws of the State of Maryland.

**SECOND:** The name of the limited liability company is MHS Medical Solutions, LLC (the "Company").

**THIRD:** The duration of the Company shall be perpetual.

**FOURTH:** The Company is formed in order (i) to engage in any lawful business, except the business of acting as an insurer; (ii) to have and exercise all powers now or hereafter conferred by the laws of the State of Maryland; and (iii) to do any and all things necessary, convenient or incidental to the foregoing.

**FIFTH:** The address of the principal office of the Company is 7080 Samuel Morse Drive, Columbia, Maryland 21046

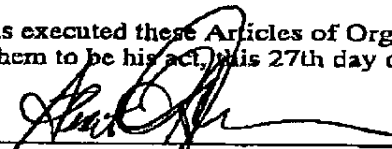
**SIXTH:** The name and address of the registered agent of the Company is Stuart L. Soberman, 7080 Samuel Morse Drive, Columbia, Maryland 21046

**SEVENTH:** The members agree to be bound by the terms of the signed operating agreement, as such may be amended, except as they may be contradicted by the laws of the State of Maryland.

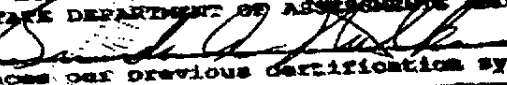
**EIGHTH:** As set forth in Section 4A-401(A)(3) of the Maryland Limited Liability Company Act, Title 4A of the Corporations and Associations Article of the Annotated Code of Maryland, the authority of members to act for the Company solely by virtue of their being members is limited and is as set forth in the written operating agreement of the Company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization of MHS Medical Solutions, LLC, and acknowledges them to be his act, this 27th day of October 2003.

  
Stuart L. Soberman  
Authorized Person

  
Stuart L. Soberman  
Resident Agent

After filing please return to:  
Stuart L. Soberman, Esq.  
7080 Samuel Morse Drive  
Columbia, Maryland 21046

STATE OF MARYLAND	
I hereby certify that this is a true and complete copy of the <u>2</u> page document on file in this office. DATED: <u>10/27/2003</u>	
STATE DEPARTMENT OF ASSESSMENTS AND TAXATION	
BY: 	Custodian
This stamp replaces our previous certification system. Effective: 6/95	