

MO4 00000042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

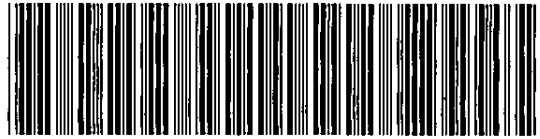
Special Instructions to Filing Officer:

**A. LUNT**

NOV - 5 2008

**EXAMINER**

Office Use Only



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11/03/08--01010--009 \*\*30.00

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2008 NOV - 3 PM 2: 24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sterling Group Billing Services, 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:

Legal Dept  
(Name of Person)

Sterling Healthcare  
(Firm/Company)

6400 Atlantic Blvd  
(Address)

Jacksonville, FL 32211  
(City/State and Zip Code)

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2008 NOV -3 PM 2:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Leslie Carzoli at ( 904 ) 805-1300  
(Name of Person) (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: Sterling Group Billing Services, LLC
2. Jurisdiction of its organization: DE
3. Date authorized to do business in Florida: January 1, 2004


**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? 9/1/05
5. New name of the limited liability company: Optimal Billing Solutions, LLC  
(must end with "Limited Liability Company," "L.L.C.," "LLC," or "Limited Liability Partnership," "L.L.P.," "LLP," or "Limited Partnership," "L.P.," "LP.")

(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:  
N/A
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:  
N/A
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: N/A

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

Sarah C. Herzog Crass

Typed or printed name of signee

**Filing Fee: \$25.00**

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2008 NOV 13 PM 2:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "STERLING GROUP BILLING SERVICES, LLC", CHANGING ITS NAME FROM "STERLING GROUP BILLING SERVICES, LLC" TO "OPTIMAL BILLING SOLUTIONS, LLC", FILED IN THIS OFFICE ON THE FIRST DAY OF SEPTEMBER, A.D. 2005, AT 8 O'CLOCK A.M.



3758303 8100

081002140

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6906401

DATE: 10-10-08

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 08:00 AM 09/01/2005  
FILED 08:00 AM 09/01/2005  
SRV 050721053 - 3758303 FILE

**STATE OF DELAWARE  
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: STERLING GROUP  
BILLING SERVICES, LLC
2. The Certificate of Formation of the limited liability company is hereby amended  
as follows: OPTIMAL BILLING SOLUTIONS, LLC  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IN WITNESS WHEREOF, the undersigned have executed this Certificate on  
the 22nd day of August, A.D. 2005.

By: Eugene F. Dauchert, Jr.  
Authorized Person(s)

Name: Eugene F. Dauchert, Jr.  
Print or Type