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10 SEP 20 PM 4:55

B. KOHR

SEP 21 2010

EXAMINER

**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: Correct Care Solutions, LLC
2. Jurisdiction of its organization: Tennessee
3. Date authorized to do business in Florida: 7/30/2004

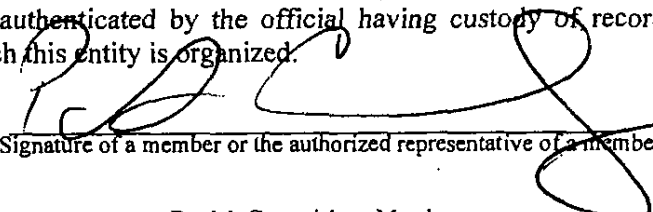
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SECTION II (4-7 complete only the applicable changes)

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? _____
5. New name of the limited liability company: _____
(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: Kansas
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

Patrick Cumiskey, Member

Typed or printed name of signee

Filing Fee: \$25.00

STATE OF KANSAS
OFFICE OF
SECRETARY OF STATE
CHRIS BIGGS

I, CHRIS BIGGS, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 3516663

Entity Name: CORRECT CARE SOLUTIONS, LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: MARTI LEWIS

Registered Office: 534 S KANSAS AVE SUITE 800, TOPEKA, KS 66603

was filed in this office on August 29, 2003, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

In testimony whereof I execute this certificate and affix
the seal of the Secretary of State of the state of Kansas
on this day of September 02, 2010



A handwritten signature in black ink, appearing to read "Chris Biggs", written over a horizontal line.

CHRIS BIGGS
SECRETARY OF STATE

Certificate ID: 343404 - To verify the validity of this certificate please visit
<https://www.accesskansas.org/bess/flow/validate> and enter the certificate ID number.