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SECRETARY OF STATE TALL AHASSEE, FLORIDA

APPROVED AND FILED

U. Lewis 14

COVER LETTER

Registration Section

TO:

Division of Corporations Heritage Healthcare of Santa Rosa, 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: Rozlan Tabor Name of Person PruittHealth Firm/Company 1626 Jeurgens Court Address Norcross, Georgia 30093 City/State and Zip Code rtabor@pruitthealth.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Rozlan Tabor Area Code & Daytime Telephone Number Name of Person **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ■ \$55 Filing Fee & ■ \$60 Filing Fee, □ \$30 Filing Fee & ■ \$25 Filing Fee Certificate of Status Certificate of Status & Certified Copy 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: Heritage Healthcare of Santa Rosa, LLC			
2.	Jurisdiction of its organization: Georgia M070000056	70		
3.	Date authorized to do business in Florida: 1/26/2007	ដ		
	SECTION II (4-7 complete only the applicable changes)) DEC		
	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 11/26/2013	<u>3</u>		
5.	New name of the limited liability company: PruittHealth - Santa Rosa LLC (must end with "Limited Liability Company," "L.L.C.," or "LLC!")	PH 2: 28		
Flo the	Iname unavailable, enter alternate name adopted for the purpose of transacting business in orida and attach a copy of the written consent of the managers or managing members adopting e alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." "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 until the law of which this entity is organized. Signature of a member or the authorized representative of a member	nder		
	Neil L. Pruitt, Jr.			
	Typed or printed name of signee			

Filing Fee: \$25.00

STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER DATE INC/AUTH/FILED: January 12, 2007

JURISDICTION PRINT DATE

: 07005134

: Georgia

: December 30, 2013

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

PRUITTHEALTH - SANTA ROSA LLC A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Brian P. Kemp Secretary of State

Control No.: 07005134

STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF NAME CHANGE

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

HERITAGE HEALTHCARE OF SANTA ROSA, LLC

Name Changed To

PRUITTHEALTH - SANTA ROSA LLC

is hereby issued a CERTIFICATE OF NAME CHANGE under the laws of the State of Georgia on November 26, 2013 by the filing of all documents in the Office of the Secretary of State and by the paying of all fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on November 27, 2013



B: P.h.

Brian P. Kemp Secretary of State



Office Of The Secretary Of State Corporations Division

Articles Of Amendment

To Articles of Organization

2013 NOV 26 AM 9: 41

SECRETARY OF STATE CORPORATIONS DIVISION

Article One

The Name Of The Limited Liability Company Is:

Heritage Healthcare of_Santa Rosa, LLC

Article Two

The Date The Articles Of Organization Were Filed Was:

January 12, 2007

Article Three

The Limited Liability Company Hereby Adopts The Following Amendment To Change The Name
Of The Organization. The New Name Of The Organization Is:

PruittHealth - Santa Rosa LLC

IN WITNESS WHEREOF, the undersigned has executed these Articles Of Amendment

on 11-/25/2013

(Signature And Capacity in which signing)

Neil L. Pruitt, Jr.

Chairman and CEO of Manager

Form CD 110