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SECRETARY OF STATE

COVER LETTER

Division of Corporations					
SUBJECT: PartnerCare Senior M	farketing Division, L.L.C.				
	(Name of Foreign Limited Liability Company)				
Dear Sir or Madam:					
The enclosed application, certificate and fe	c(s) are submitted for filing.				
Please return all correspondence concerning	g this matter to the following:				
Mark B. Graham					
(Name of Person)					
<u> </u>					
(Firm/Company)					
2536 Countryside Blvd., 6th Flo	or				
(Address)					
Clearwater, FL 33763					
(City/State and Zip C	Code)				
For further information concerning this ma	tter, please call:				
Mark B. Graham	at (727) 726-0726				
(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	ount:				
\$25 Filing Fee \$30 Filing Fee & Certificate of State					

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: Senior Marketing Division, L.L.C.
2.	Jurisdiction of its organization: Delaware
3.	Date authorized to do business in Florida: March 7, 2007
	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? August 16, 2007
5.	New name of the limited liability company: PartnerCare Senior Marketing Division, L.L.C. (must end with "Limited Liability Company, ""L.L.C.," or "LLC.")
Flo the	name 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 a 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 under the law of which this entity is organized. Signature of a member or the authorized representative of a member
	Mark B. Graham
	Typed or printed name of signee
	Filing Fee: \$25.00

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 "SENIOR MARKETING DIVISION, L.L.C.", CHANGING ITS NAME FROM "SENIOR MARKETING DIVISION, L.L.C." TO "PARTNERCARE SENIOR MARKETING DIVISION, L.L.C.", FILED IN THIS OFFICE ON THE SIXTEENTH DAY OF AUGUST, A.D. 2007, AT 1:24 O'CLOCK P.M.

THE E !

Varnet Smile Mindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5934708

DATE: 08-17-07

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State of Delaware Secretary of State Division of Corporations Delivered 01:26 PM 08/16/2007 FILED 01:24 PM 08/16/2007 SRV 070928772 - 4309055 FILE

STATE OF DELAWARE CERTIFICATE OF AMENDMENT OF

SENIOR MARKETING DIVISION, L.L.C.

- 1. The name of the limited liability company is Senior Marketing Division, L.L.C.
- 2. The Certificate of Formation of the limited liability company is hereby amended as follows:

ARTICLE FIRST: THE NAME OF THE LIMITED LIABILITY COMPANY IS PartnerCare Senior Marketing Division, L.L.C.

IN WIT	NESS WH	EREOF, the undersigned has executed this Certificate on the	16th
day of _	August	2007	

Authorized Person(s)

Name: Mark B. Graham

Print/Type Name

2007 AUG 27 PM 4: 1