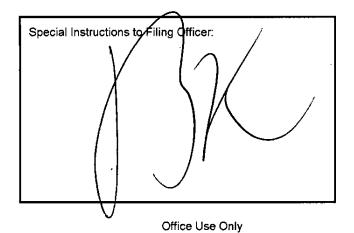
# M07000003111

(Requestor's Name)
(Address)
(Address)
. (City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)



Certificates of Status

Certified Copies \_\_



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DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

RECEIVED

O7 JUL 10 AM 8: 27 BECRETARY OF STATE



DRPORATION SERVICE COMPANY			
	ACCOUNT NO	). :	072100000032

REFERENCE 988568 4813875
HORIZATION PUBLICATION

COST LIMIT : \$ 25.00

ORDER DATE : July 9, 2007

ORDER TIME : 1:50 PM

ORDER NO. : 988568-010

CUSTOMER NO: 4813875

#### FOREIGN FILINGS

NAME: FTIRX, LLC

XX \_\_\_ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

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)

SECTION I (1.2 marsh ha accomplete IV
SECTION 1 (1-3 must be completed)
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: FTIRX, LLC  2. Jurisdiction of its organization: Delaware  3. Date authorized to do business in Florida: May 25, 2007
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: May 25, 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?
5. New name of the limited liability company: FTRX, 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
Jennifer L. Volet  Typed or printed name of signee

Filing Fee: \$25.00

PAGE 1

## Delaware

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "FTIRX, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "FTRX, LLC", THE NINTH DAY OF JULY, A.D. 2007, AT 5:57 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FTIRX, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF MAY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



Harriet Smith Windsor, Secretary of State

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5827990

DATE: 07-10-07

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070796811