Division of Corporations

Page 1 of 1



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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H140001594253ABC+

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222~1092

: (850)878-5368 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings, Enter only one email address please. **

| Email | Address: | : | | | |
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN P4 HEALTHCARE, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Centified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu

Corporate Filing Menu

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7/2/2014

COVER LETTER

| SUBJECT: P4 Healthcare, 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: Stephanie Ludwig Name of Person Cardinal Health, Inc. |
|--|
| 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: Stephanie Ludwig Name of Person |
| The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Stephanie Ludwig Name of Person |
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| Stephanie Ludwig Name of Person |
| Name of Person |
| |
| Cardinal Health Inc |
| Cardinat restau Alf. |
| Firm/Company |
| Legal Department, 7000 Cardinal Place |
| Address |
| Dublin, OH 43017 |
| City/State and Zip Code |
| pam.foose@cardinalhealth.com |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Stephanie Ludwig at (514) 757-5470 |
| Name of Person Area Code & Daytime Telephone Number |
| STREET/COURIER ADDRESS: MAILING ADDRESS: |
| Registration Section Registration Section |
| Division of Corporations Clifton Building Division of Corporations P.O. Box 6327 |
| 266) Executive Center Circle Tallahassee, Florida 32314 |
| Tallahassee, Florida 32301 |
| Enclosed is a check for the following amount: |
| □ \$25 Filing Fee □ \$30 Filing Fee & □ \$55 Filing Fee & 11 \$60 Filing Fee, Certificate of Status |
| CR2E055 (12/13) |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

| | mited liability Company as it app lealthcare, LLC MOO | ears on the records of the Florida Department of | |
|---|--|--|--|
| 2. Jurisdictio | n of its organization: Delaware | | |
| 3. Date author | orized to do business in Florida: | 8/21/2009 | |
| SECTION II | (4-7 complete only the applicat | ole changes) | |
| 4. New name | of the limited liability company: | Cardinal Health 122, LLC | |
| | | (must contain "Limited Liability Company, ""L.L.C.," or "LLC.") | |
| Florida and at the alternate r or "LLC.") | tach a copy of the written consent name. The alternate name must con | ated for the purpose of transacting business in to fit the managers or managing members adopting nain "Limited Liability Company," "L.L.C." forganization, indicate new jurisdiction: | |
| | ndment changes person, title or ca | pacity in accordance with 605.0902 (1)(e), indicate | |
| aforementi | oned amendment(s), duly authent n under the law of which this entit | d: no more than 90 days old, evidencing the icated by the official having custody of records in the ry is organized. | |

Rylan O. Rawlins, Asst. Secretary of Healthcare Solutions Holding, LLC, the sole member

Typed or printed name of signee

Filing Fee: \$25.00

OIVISION OF CORPURATION

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "P4 HEALTHCARE, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "CARDINAL HEALTH 122, LLC", THE TWENTY-FOURTH DAY OF JUNE, A.D. 2014, AT 11:37 O'CLOCK A.M.

3911788 8320

140875591

You may verify this certificate online at corp.dolaware.gov/authver.shim!

Jeffroy W. Bullock, Socretary of State

DATE: 06-24-14