

11 0000000 441

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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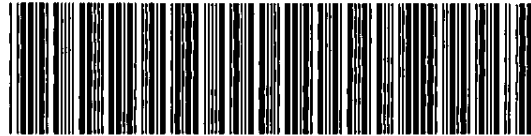
(Business Entity Name)

(Document Number)

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RECEIVED  
11 FEB 15 AM 10:49  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

B. KOHR  
FEB 15 2011  
EXAMINER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 FEB 15 PM 12:53



CORPORATION SERVICE COMPANY

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 FEB 15 PM 12:53

ACCOUNT NO. : I20000000195

REFERENCE : 675360 4306440

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : February 14, 2011

ORDER TIME : 8:40 AM

ORDER NO. : 675360-010

CUSTOMER NO: 4306440

FOREIGN FILINGS

NAME: EXPRESS ENTERPRISES HOLDINGS,  
LLC

XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT#

EXAMINER: \_\_\_\_\_

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

FILED STATE  
SECRETARY OF CORPORATIONS  
FEB 15 PM 12:53

**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: Express Enterprises Holdings, LLC
2. Jurisdiction of its organization: DE
3. Date authorized to do business in Florida: 1/31/11

**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? 2/14/11
5. New name of the limited liability company: Express Dental Holdings, LLC  
(must end with "Limited Liability Company," "LLC," 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," "LLC," 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:  
\_\_\_\_\_
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.

Warren Green  
Signature of a member or the authorized representative of a member

One Call Medical, Inc., Warren Green, CFO

Typed or printed name of signee

**Filing Fee: \$25.00**

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "EXPRESS ENTERPRISES HOLDINGS, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "EXPRESS DENTAL HOLDINGS, LLC", THE FOURTEENTH DAY OF FEBRUARY, A.D. 2011, AT 5:08 O'CLOCK P.M.

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.

4923908 8320

110156470

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 8560404

DATE: 02-15-11