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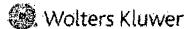
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Chris Rickard
Senior Fulfillment Specialist
CT Corporation

Team (614) 280-3338

<u>GlobalFulfillmentTeam@wolterskluwer.com</u>



4400 Easton Commons Way Suite 125 Columbus, Ohio 43219 www.wolterskluwer.com

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF A THORITY TO TRANSACT **BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

• •	ny as it appears on the records of the Florida	a Department of
State: PST Services, LLC		
2. The Florida document number of this	limited liability company is: M17000001754	
3. Jurisdiction of its organization: Georg	gia	
4. Date authorized to do business in Flor	rida: 03/01/2017	- St.O.
SECTION II (5-9 complete only the ap	oplicable changes)	12.52
5. New name of the limited liability com	npany; Change Healthcare Technology Enabled Se (must contain "Limited Liability Company, " "L.	LC.," or "LLC.")
unsent of the managers or managing members adoptir Company," "L.L.C." or "LLC.")	the purpose of transacting husiness in Florida and attaching the alternate name. The filternate name must contain "L	imited Liability
he new registered agent and/or the new r	registered office address here:	met the name of
Name of New Registered Agent:		
New Registered Office Address:		
	Enter i Tavida Street Address	· · ·
	Enter Florida Street Address , Florida City	Zip Code
New Registered Agent's Signature, if cha hereby accept the appointment as regist comply with the provisions of all statutes luties, and I am familiar with and accept provided for in Chapter 605, F.S. Or, if the egistered office address, I hereby confirm	, Florida	o. I further agree to nance of my I agent as a change in the
New Registered Agent's Signature, if cha hereby accept the appointment as regist omply with the provisions of all statutes luties, and I am familiar with and accept trovided for in Chapter 605, F.S. Or, if the egistered office address, I hereby confirm writing of this change.	Florida City Anging Registered Agent; tered agent and agree to act in this capacity relative to the proper and complete perform the obligations of my position as registered his document is being filed to merely reflect m that the limited liability company has bee	n. I further agree to nance of my I agent as a change in the n notified in
New Registered Agent's Signature, if cha hereby accept the appointment as regist comply with the provisions of all statutes luties, and I am familiar with and accept provided for in Chapter 605, F.S. Or, if the registered office address, I hereby confirm writing of this change.	Florida City Anging Registered Agent: tered agent and agree to act in this capacity relative to the proper and complete perfort the obligations of my position as registered his document is being filed to merely reflect m that the limited liai litty company has bee	n. I further agree to nance of my I agent as a change in the n notified in
New Registered Agent's Signature, if cha I hereby accept the appointment as regist comply with the provisions of all statutes duties, and I am familiar with and accept provided for in Chapter 605, F.S. Or, if the registered office address, I hereby confirm writing of this change.	Florida City Anging Registered Agent; tered agent and agree to act in this capacity relative to the proper and complete perform the obligations of my position as registered his document is being filed to merely reflect m that the limited liability company has bee	n. I further agree to nance of my I agent as a change in the n notified in

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STATE OF GEÖRGIA

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

Control Number: K000830



CERTIFICATE OF FACT

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

Effective December 31, 2017, PST SERVICES, LLC, a Georgia Limited Liability Company, filed a Certificate of Amendment, changing the name to Change Healthcare Technology Enabled Services, LLC, a Georgia Limited Liability Company.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated herein.

> Docket Number : 15595996 Print Date

: 03/22/2018

Form Number



Brian P. Kemp Secretary of State