## 900000036

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
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Account#: I20000000088

Date: 05/06/2019	
Name: Joy Weaver	
Reference #: 1064119	
Entity Name: HEALTHNOW ADMINISTRATIVE SERVICES, LLC	36
Articles of incorporation/Admonzation to Transact Business  Amendment	10:6 RV 9- AVH BIUG
✓ Dissolution/Withdrawal  ☐ Fictitious Name  ☐ Other	
Authorized Amount: \$25 Signature:	

## RESOLUTION TO WITHDRAW ALTERNATE NAME IN THE STATE OF FLORIDA PURSUANT TO 605.0906 (1), FLORIDA STATUTES

I, the undersigned, do hereby certify that I am the Auth	orized Person of
BROKERAGE CONCEPTS, LLC	, a limited liability
(Name of Limited Liability Compa	
company duly organized and existing under the laws of	Delaware
	(State or Country of Organization)
Because the name of this foreign limited liability compared Florida Statutes, the limited liability company hereby realternate name in the state of Florida:  HealthNow Administrative Services, LLC	any now satisfies the requirements of s. 605.0112, enounces the following
(Alternate Name Renounced i	n State of Florida)
Signature of Authorized Person	APPROVED APPROVED Date

Make check payable to Florida Department of State and mail to:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

CR2E128 (2/14)