

CORPORATE
ACCESS,
INC.

M990000001525

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP 4/10/01 10:00

CERTIFIED COPY _____

CUS _____

☒ PHOTO COPY _____

☒ FILING for. LLC Amend

1.) Simione Central National, LLC
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS _____

RECEIVED
DIVISION OF STATE
CORPORATIONS
01 APR 10 PM 12:00
TALLAHASSEE, FLORIDA

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*****25.00 *****25.00

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 APR 10 AM 10:08
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SUFFICIENCY OF FILING

4/10-01

"When you need ACCESS to the world"
CALL THE FILING AND RETRIEVAL AGENCY DEDICATED TO SERVING YOU!

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

SECTION I (1-3 must be completed)

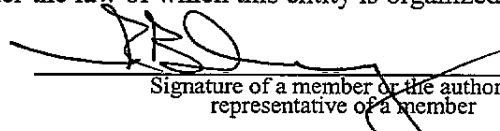
1. Name of limited liability company as it appears on the records of the Florida Department of State: Simione Central National, LLC
2. Jurisdiction of its organization: Georgia
3. Date authorized to do business in Florida: September 24, 1999

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? January 30, 2001
5. New name of the limited liability company: CareCentric National, 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

R.B. Dewey

Typed or printed name of signee

Filing Fee: \$25.00

FILED
APR
01 APR 10 PM 12:00
TALLAHASSEE, FLORIDA

Secretary of State

Corporations Division

315 West Tower

#2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

DOCKET NUMBER : 010741060
PRINT DATE : 03/15/2001
FORM NUMBER : 218

ARNALL GOLDEN & GREGORY
HARRIETT H. BOWEN
1201 W. PEACHTREE ST STE 2800
ATLANTA, GA. 30309

CERTIFICATE OF FACT

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that the automated database for business entities has been searched and that the following named entity,

Effective January 30, 2001, SIMIONE CENTRAL NATIONAL, LLC, a Georgia limited liability company filed certificate of name change amendment into: CARECENTRIC NATIONAL, LLC

Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

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 within.



Cathy Cox

Cathy Cox
Secretary of State

01 APR 10 PM 12:00
SECRETARY OF STATE
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