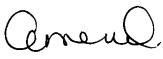
## 703000056173

(Req	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phon	e #)
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01/05/15--01038--003 \*\*35.00



10/8/15

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Broad Ane		ment Co.		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
	Peter Zuckoff				
		Name of Contact Person	1		
1	RAPS Acquisition	n Holdings, LLC			
_	· · · · · · · · · · · · · · · · · · ·	Firm/ Company			
•	7100 W Camino	Real, Suite 301			
_		Address			
!	Boca Raton, Florida 33433				
City/ State and Zip Code					
D <b>Z</b> U(	ckoff@resolutem	d.com			
<del>p_a</del>		sed for future annual report	notification)		
For further information  Peter Zuckoff	concerning this matter, pleas	se call: at (561	409-2328		
	Contact Person		de & Daytime Telephone Number		
	the following amount made		,		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

## **Articles of Amendment Articles of Incorporation**

FILED.

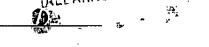
2015 JAN -5 PM 2: 31

Broad Anesthesia Management C
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(Name of Corporation as currently filed with the Florida Dept. of State)

P03000056173

(Document Number of Corporation (if known)



lment(s) to

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  C. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  Thomas Nordstrom  7100 W Camino Real  Thomas Nordstrom  7100 W Camino Real				
Suite 301  Enter new principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  Thomas Nordstrom	Corp.," "Inc.," or Co.," or the design	nation "Corp," "Inc," or	"Co". A professio	
Suite 301  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Enter new mailing address MAY BE A POST OFFICE BOX)  Suite 301  Boca Raton, Florida 3343  Suite 301  Boca Raton, Florida 3343  O. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  Thomas Nordstrom	. Enter new principal office address.	if applicable:	7100 W	Camino Real
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Suite 301  Boca Raton, Florida 3343  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  Thomas Nordstrom			Suite 30	1
(Mailing address MAY BE A POST OFFICE BOX)  Suite 301  Boca Raton, Florida 3343  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  Thomas Nordstrom			Boca Rat	on, Florida 33433
Suite 301  Boca Raton, Florida 3343  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  Thomas Nordstrom			7100 W (	Camino Real
. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  Name of New Registered Agent			Suite 301	
If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  Name of New Registered Agent			Boca Rat	on, Florida 33433
	new registered agent and/or the new	w registered office addre	ess:	ter the name of the
	rame of new registered rigem	7100 W Camir	no Real	
(Florida street address)	•	(Florida .	street address)	<del></del>
New Registered Office Address: Boca Raton Florida 33433	New Registered Office Address:	Boca Raton		, Florida 33433
(City) (Zip Code)		(Cii	(v)	(Zip Code)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange	<u>PT</u> <u>Joh</u>	n <u>Doe</u>	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P,CEO,	Brian Gillon	7100 W Camino Real
Add			Suite 301
Remove			Boca Raton, Florida 33433
2) Change	D	Harvey Plosker	501 Glades Road
Add			Boca Raton, Florida 33432
Remove	D	Andrew Astrove	501 Glades Road
3) Change	<del></del>	Andrew Astrove	Boca Raton, Florida 33432
Remove			
4) Change	s,T	Peter Zuckoff	7100 W Camino Real
Add			Suite 301
Remove			Boca Raton, Florida 33433
5) Change	V	Jay Martin	7100 W Camino Real
Add			Suite 301
Remove			Boca Raton, Florida 33433
6) Change	V	Brian Murphy	7100 W Camino Real
Add			Suite 301
Remove			Boca Raton, Florida 33433

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
	•
······································	
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
rovisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	·
Effective date if applicable:	
(no more than 90 days after amendment file	date)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	e amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The foll must be separately provided for each voting group entitled to vote separately on the amend	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action a action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and s action was not required.	hareholder
Dated 12/23/2014	
Signature	-
(By a director, president of other officer if directors or officers is selected, by an incorporator — if in the hands of a receiver, trustee	
appointed fiduciary by that fiduciary)	, or other court
Peter Zuckoff	
(Typed or printed name of person signir	ıg)
Secretary and Treasurer	
(Title of person signing)	