P03000068374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

500033716685

W04000016773

04/30/04--01102--008 **43.75

Name
Change
Amend

FILED
04 APR 30 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
04 APR 30 PM 3:19
TALLAHASSEE, FLORIDA

000789 000672

BOR
5/3/04

Sunstate Research
Requestor's Name

Address

City/State/Zip 6516-5454 Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Doctors Choice Healthcare Plans
(Corporation Name) (Document #)

2. Incorporate ?
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☐ Pick up time _____ ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☒ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials _____

CR2E031(7/97)

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 30, 2004

Sunstate Research Associates
143 W. Whetherbine Way
Tallahassee, FL 32301

SUBJECT: DOCTORS CHOICE HEALTHCARE PLANS, INC.
Ref. Number: P03000068374

Please have corrected dated 4/30/04 if possible

We have received your document for DOCTORS CHOICE HEALTHCARE PLANS, INC. and your check(s) totaling $43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Document Specialist

Letter Number: 404A00029557

FILED
04 APR -3 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT TO
ARTICLES OF INCORPORATION
OF DOCTORS CHOICE HEALTHCARE PLANS, INC.

FILED
04 APR 30 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Document No. P03000068374

Pursuant to Section 607.1005 of the Business Corporation Act of the State of Florida, the undersigned, being the Sole Incorporator of DOCTORS CHOICE HEALTHCARE PLANS, INC. (hereinafter the "Corporation"), a Florida corporation, and desiring to amend its Articles of Incorporation, does hereby certify:

ARTICLE I
NAME

The name of the Corporation shall be changed to Medica HealthCare Plans, Inc.

The foregoing amendment was adopted by all of the Directors of the Corporation pursuant to section 607.1005 of the Florida Business Corporation Act, effective as of April 15, 2004. Therefore, a unanimous consent of the directors for the amendment to the Corporation's Articles of Incorporation was sufficient for approval and no shareholder approval was required.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Amendment to Articles of Incorporation this 16 day of April, 2004.

Rafael P. Perez
President