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CloverLeaf Capital

(407) 905-9695

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Division of Corporations

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Account Name : CLOVERLEAF CAPITAL ADVISORS, LLC
Account Number : I19990000230
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BASIC AMENDMENT

BEN ZOLPER PAIN MANAGEMENT CENTER, INC.

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ARTICLES OF AMENDMENT
OF
ARTICLES OF INCORPORATION
OF
BEN ZOLPER PAIN MANAGEMENT CENTER, INC.

FILED
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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

**Pursuant to Provisions of the
 Florida Business Corporation Act**

BEN ZOLPER PAIN MANAGEMENT CENTER, INC., (the "Corporation"), a corporation organized and existing under the Florida Business Corporation Act, does hereby certify that, pursuant to the applicable section(s) of the Florida Business Corporation Act, the Board of Directors of the Corporation adopted the resolutions set forth below, on July 19, 2004, which resolutions are in full force and in effect as of the date hereof:

WHEREAS, the Corporation is authorized by its Bylaws to amend or repeal any provision contained in the Articles of Incorporation (the "Articles");

WHEREAS, the Board of Directors of the Corporation, by action of consent (resolution) on July 19, 2004, with respect to the foregoing matters have authorized the amendments set forth below to the Articles.

NOW THEREFORE IT IS RESOLVED, that:

1. Article I of the Articles is hereby amended to reflect that the name of the Corporation is hereby changed to BENJAMIN ZOLPER, M.D., INC.

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- 2. Except as set forth herein the Articles of Incorporation of the Corporation remain unchanged.

The foregoing was authorized by the Board of Directors and the Stockholders of the Corporation by written consent effective July 19, 2004.

IN WITNESS WHEREOF, Benjamin Zolper, M.D., Inc. through its designated Director has caused this Certificate to be duly executed in its corporate name as of July 19, 2004.

BENJAMIN ZOLPER, M.D., INC.

By: Mark Szporca
Mark Szporca, Director

Fax Audit No. H040001489183

STATE OF FLORIDA)
)
COUNTY OF ORANGE)

On this 19th day of July 2004, before me, a Notary Public in and for the State and County aforesaid, personally appeared Mark Szporka, who either is known to me personally or who supplied _____ as identification, acknowledged to the fact that he is the Registered Agent and Incorporator of BENJAMIN ZOLPER, M.D., INC., and that he executed as said director the foregoing Articles of Amendment of said Corporation as his act and deed and as the act and deed of said corporation.

WITNESS my hand and seal of office on the date and year first aforesaid.

Jennifer S. Loomis
NOTARY PUBLIC

Notary Public Commission expires: 4/30/08
[Notarial Seal]

