

P04000172956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

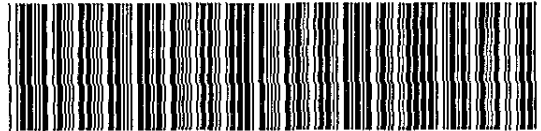
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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 15, 2005

CERTIFIED BILLING SOLUTIONS, INC.
8004 MIAMI LAKES DR., STE 329
MIAMI LAKES, FL 33016

SUBJECT: CERTIFIED BILLING SOLUTIONS, INC.
Ref. Number: P04000172956

This is to advise you that on, December 29, 2004, we filed your corporation under the above name, which was not available.

Therefore, we request that you file an amendment, at no charge, to change the name of your corporation to make it distinguishable from the existing entity. We have enclosed forms and guidelines for your assistance.

We apologize for this inconvenience and trust that you understand the urgency in completing this amendment, and returning it along with a copy of this letter to my attention as soon as possible.

If you have any questions, please call (850) 245-6924.

Sincerely,

Stacy Prather
Document Specialist Supervisor
New Filings Section

Letter Number: 805A00025859

Articles of Amendment
to
Articles of Incorporation
of

Certified Billing Solutions, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

P04000172956

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

Certified Billing Services Inc.

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

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(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: _____

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"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 and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 15 day of May, 2005.

Signature Susana C Gil
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)

Susana C Gil
(Typed or printed name of person signing)

President
(Title of person signing)

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