P050070443

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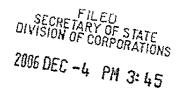
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Vivienne	e Evans ARNP, Inc.	
DOCUMENT NUMBER: P050000704	43	<u> </u>
The enclosed Articles of Amendment and fe	ee are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Vivienne A Evans	me of Contact Person)	and all to the second of the
	(Firm/ Company)	* <u></u>
18206 Fox Trace Cour	t	
	(Address)	
Lutz, FL 33549		
(City	y/ State and Zip Code)	
For further information concerning this matt	er, please call:	
Vivienne A Evans (Name of Contact Person)	at (813) 215-297 (Area Code & Daytime T	· · ·
Enclosed is a check for the following amount	ıt:	
	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	ile



Articles of Amendment to Articles of Incorporation of



Vivienne Evans ARNP, Inc.	, <u></u>
(Name of corporation as currently filed with the Florida Dept. of State)	
P05000070443	ル (基本) Age 上が高さ
(Document number of corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	
NEW CORPORATE NAME (if changing):	
AGS Healthcare Specialists, 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.")	
<u>AMENDMENTS ADOPTED</u> - (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (<u>BE SPECIFIC</u>)	
and of Affect Tife(5) being amended, added of detects. (DEGLEGE)	رہ میں ہے جھی میں ہے
	مين چه ماهايي ماران در
	and the second s
	en e
	·
(Attach additional pages if necessary)	
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provision for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate No	s /A)
	<u>*</u>

(continued)

The date of each amendment(s) adoption: 11-22-06	. <u> </u>
Effective date if applicable: 11-22-06 (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.	
Signature (By a director, president or other officer - if directors or officers have not been	<u>2</u> 7
selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Vivienne A. Evans	e <u># </u>

FILING FEE: \$35

President

(Typed or printed name of person signing)

(Title of person signing)