

205382

Florida Department of State
Division of Corporations
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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
ATALYST RX PLAN SERVICES INSURANCE COMPANY**

Certificate of Status	0
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C. MUSTAIN

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Catalyst Rx Plan Services Insurance Company
Name of Corporation

DOCUMENT NUMBER: P05382

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person

Firm/Company

Address

City/State and Zip Code

frank.rowinski@src.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Contact Person

at (_____) _____

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

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\$35.00 Filing Fee

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\$52.50 Filing Fee,
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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 Circle
Tallahassee, FL 32301

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

P05382

(Document number of corporation (if known))

1. Catalyst Rx Plan Services Insurance Company
(Name of corporation as it appears on the records of the Department of State)
2. Ohio 3. 03/21/1985
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 08/20/2012

5. Catamaran Insurance of Ohio, Inc.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Jeffrey Park
(Typed or printed name of person signing)

(Title of person signing)

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show a Certificate of Amendment of CATALYST RX PLAN SERVICES INSURANCE COMPANY, an Ohio Corporation, Charter No. 210268, changing its corporate title to: CATAMARAN INSURANCE OF OHIO, INC., was filed August 20, 2012. Said Corporation, CATAMARAN INSURANCE OF OHIO, INC., an Ohio Corporation, Charter No. 210268, having its principal location in Columbus, County of Franklin, was incorporated on October 19, 1948, is in GOOD STANDING upon the records of this office.



*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 14th day of November, A.D. 2012.*

Jon Husted

Ohio Secretary of State

Validation Number: 201231900101