Po800035708

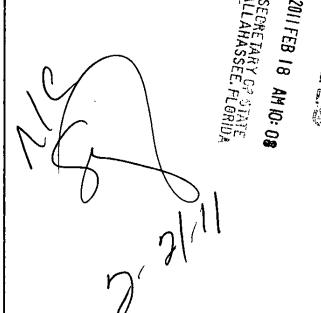
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON: OCCUP	PATIONAL HEALTH RESEARCH, INC.	
DOCUMENT NUMBER:		PO8000035708	
The enclosed Articles of Ar	nendment and fee ar	re submitted for filing.	
Please return all correspond	ence concerning this	s matter to the following:	
		M. LALIBERTY, ESQ.	
	Na	ame of Contact Person	
	JABAR, BATT	TEN, RINGER & LALIBERTY	
		Firm/ Company	
	ONE	CENTER STREET	
		Address	
		ERVILLE, ME 04901 ty/ State and Zip Code	
		•	
E-	nail address: (to be used	rk@systoc.com I for future annual report notification)	
For further information con	cerning this matter, p	please call:	
JAMES M. LALI		at (207) 873-0781	
Name of Contact		Area Code & Daytime Telephone Number	
Enclosed is a check for the	following amount ma	ade payable to the Florida Department of State:	
	.75 Filing Fee & tiffcate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)	sed)
Mailing Address Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

TALLAHASSEE FREE RICKIDA

OCCUPATIONAL HEALTH RESEARCH, INC.

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

P08000035708

(Document Number of Corporation (if known)

CELEBRATION TE	CHNOLOGY RESEARC	CH, INCThe n
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the aame must contain the word "chartered," "pr	he designation "Corp," "Inc	," or "Co". A professional corporati
3. Enter new principal office address, if ap Principal office address <u>MUST BE A STRE</u>		
C. Enter new mailing address, if applicabl	 le:	
(Mailing address <u>MAY BE A POST OFF</u>	FICE BOX)	
	registered office address in	Florida, enter the name of the
o. If amending the registered agent and/or	registered office address in	Florida, enter the name of the
o. If amending the registered agent and/or new registered agent and/or the new reg	registered office address in	
D. If amending the registered agent and/or new registered agent and/or the new registered Agent: Name of New Registered Agent:	registered office address in gistered office address:	
D. If amending the registered agent and/or new registered agent and/or the new registered Agent:	registered office address in gistered office address:	ddress)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	•		
			
	•••••		
	eding or adding additional Art additional sheets, if necessary).		
<u>provisi</u>		hange, reclassification, or cancellandment if not contained in the amo	

The date of each amendmen	t(s) adoption: JANUARY 14, 2011
Effective date if applicable:	JANUARY 14, 2011 (no more than 90 days ofter amendment file data)
-	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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	ņ
	(voting group)
✓ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated1	25/2011
Signature	was e Newson
(By sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	WILLIAM L. NEWKIRK
	(Typed or printed name of person signing)
	DIRECTOR/SECRETARY
	(Title of person signing)



1200 ONE NASHVILLE PLACE 150 FOURTH AVENUE, NORTH NASHVILLE, TENNESSEE 37219-2433 (615) 244-9270 FAX (615) 256-8197 OR (615) 744-8466 James H. Porter
Direct Dial (615) 744-8523
Fax (615) 744-8623
jporter@millermartin.com

February 17, 2011

VIA FEDERAL EXPRESS

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: Occupational Health Research, Inc.

Dear Sir or Madam:

Enclosed please find Articles of Amendment to the Articles of Incorporation of Occupational Health Research, Inc. which we would like to have filed in your office. Also enclosed is the required \$35 filing fee. Once the document has been filed, please return it to me at the following address:

James H. Porter Miller & Martin PLLC 1200 One Nashville Place 150 Fourth Avenue North Nashville, TN 3719

Thank you for your attention to this matter.

Very truly yours,

James H. Porter

JHP/cdp Enclosure