P14000082505

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SECRETARY OF STATE DIVISION OF CORPORATIONS DIVISION OF CORPORATIONS 17

Amend Mand 10 2/24/15

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: IMD Partners, Inc. DOCUMENT NUMBER: P14000082505 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Gregory T. Uliasz, Esq. Name of Contact Person Feniger & Uliasz LLP Firm/ Company 45 Bay Street Address Manchester NH 03104 City/ State and Zip Code bill.elliott@foresightmedical.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Brittany Rosemond** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



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MD Partners, Inc.			-0 23 PH 3
(Name of Corporation as	currently filed with the Flor	ida Dept. of State)	
P14000082505			
(Docume)	nt Number of Corporation (if ki	iown)	
Pursuant to the provisions of section 607. as Articles of Incorporation:	1006, Florida Statutes, this Flo	rida Profit Corporation a	lopts the following amendment(s)
A. If amending name, enter the new na	nme of the corporation:		
Foresight Management S	Services Group, Inc	· /•	The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	" A professional corpore	orated" or the abbreviation attention name must contain the
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>			
			
Enter new mailing address, if appli			
(Mailing address MAY BE A POST)	<u>OFFICE BOX</u>)	· · · · · ·	
			
			
). If amending the registered agent an	d/or registered office address	in Florida, enter the nar	ne of the
new registered agent and/or the new	v registered office address:		
new registered agent and/or the nev			
Name of New Registered Agent	William Elliott		
	William Elliott 1408 Westshore E	3lvd, Suite 1010	
		address)	-
	1408 Westshore B	address)	33607

Signature of New Registered Agent, if changing

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)

Please note the officer/director title by the first letter of the office title:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. \ If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>ee</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				-
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
Add				
Remove				

	ending or adding additional Art h additional sheets, if necessary).	(Be specific)	
	27	, , ,	
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			- •
<u>lf an</u>	amendment provides for an exc	hange, reclassification, or cancellation of issued endment if not contained in the amendment itsel	shares. r.
	(if not applicable, indicate N/A)	enument if not contained in the amendment user	<u>L.</u>
prov	g not applicable, maicale inity		
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<u>prov</u> (
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ıt(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"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 shareho action was not required.	lder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature Will Hall	
(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 co	ourt
appointed fiduciary by that fiduciary)	
William Elliott	
(Typed or printed name of person signing)	
Vice President	
(Title of person signing)	