# P31914

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ALLARIASSEE, FLORIDA

07/19/05--01032--015 \*\*43.75

## AMN HEALTHCARE SERVICES, INC.

July 15, 2005

Florida Secretary of State Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Change of Name – Worldview Healthcare, Inc. (# P31914)

Dear Sir or Madam,

Enclosed you will find an Application by Foreign Profit Corporation To File Amendment for Authorization to Transact Business in Florida, which will change the name of Worldview Healthcare, Inc. to AMN Services, Inc.

You will also find enclosed a check of \$43.75 corresponding to the filing and certified copy fees.

Please return all correspondence to:

Anne-Céline Woelk – Legal Department 12400 High Bluff Drive San Diego, CA 92130.

Should you have any questions, please call me at (858) 509-3588.

Sincerely,

Anne-Céline Woelk Legal Department

#### TRANSMITTAL LETTER

TO:	Amendment Division of 0				<u></u>	_
SUBJ	ECT:	WORLD VIEW	HEAI Name of co	LTH CARE,	RNC	·
DOC	UMENT NUN	ИВЕR:	<del>,</del> _	<u></u>	<del></del>	<del></del>
The e	nclosed Amen	dment and fee are sub	mitted for	r filing.		·
Please	e return all cor	respondence concerni	ing this ma	atter to the follow	ing:	
		ANNE - CEL	INE	WOELK		
			(Name of	person)		
	_ <u></u>	AMN HEA	LTHCA	RE, ZNC		·
		(Na	ame of firm	v/company)		
	1240	DO HIGH BL	UFF	DRIVE		
			(Addre	ss)		
	SAI	1 DIEGO,	CA	92130		
		(0.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	a Lip coup,		
For fi	irther informat	ion concerning this m	iatter, plea	ise call:		
_A	me-Célin	e WOELK ne of person)	at (	858 <u>)</u> 509	1- 35	88
	(Nan	ne of person)		(Area code & day)	iime telep	phone number)
Enclo	sed is a check	for the following amo	ount:			
	\$35.00 Filing Fee	\$43.75 Filing Fee Certificate of Sta	÷& atus □	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)		\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	Amendm Division P.O. Box	Address: ent Section of Corporations 6327 see, FL 32314		Street Address: Amendment Sect Division of Corp 409 E. Gaines Str Tallahassee, FL	orations reet	

# PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS	S IN F	LO	RIDA
(Pursuant to s. 607.1504, F.S.)	T.	_	
		8	
	<u>≥</u> ≥.	$\equiv$	77
SECTION I (1-3 must be completed)	2 -	<u></u>	Formerhor
(1-3 MOST BE COMPLETED)	<u>S</u>	9	J
	<u>[1</u> ]	P <b>H</b>	П
P31914	<u></u>		
(Document number of corporation (if known))		Š	
	FLDRIDA	59	
	$\Rightarrow$		
1. WORLDVIEW HEALTHCARE, 2NC.			
(Name of corporation as it appears on the records of the Department of State)			
2. NORTH CAROLINA 3. 1/126/1990 (Incorporated under laws of) (Date authorized to do business			
(Incorporated under laws of) (Date authorized to do business	in Florid	ia)	
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 t	he law	sof	
man in the contract of the con	no lavi	501	
its jurisdiction of incorporation? <u>June 30, 2005</u>			
AMAL SCOULAGE ONE			
Name of corporation after the amendment, adding suffix "corporation," "company," or "inco	rnorat	<u> </u>	<del></del>
appropriate abbreviation, if not contained in new name of the corporation)	прогав	cu, c	и
The property of the control of the c			
(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose	of trar	ısacti	ng
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)			
	1-1	//	
(Signature of a director, president or other object if in the hands (Date)	2-1	77	t
(Signature of a director, president or other object if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)			
	00 5	Side	سبسه.
Typed or printed name of person signing)  SENIOR VICE  (Title of person s		<u>9 11</u> 10	1 4 1



## NORTH CAROLINA

## Department of The Secretary of State

To all whom these presents shall come, Greetings:

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

#### ARTICLES OF AMENDMENT

OF

WORLDVIEW HEALTHCARE, INC.
WHICH CHANGED ITS NAME TO
AMN SERVICES, INC.

the original of which was filed in this office on the 30th day of June, 2005.



Document Id: C20051750006

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 30th day of June, 2005

Claire I. Marshall

Secretary of State

SOSID: 0273380

Date Filed: 6/30/2005 8:04:00 AM
Elaine F. Marshall

North Carolina Secretary of State

C200517500062

### State of North Carolina Department of the Secretary of State

#### ARTICLES OF AMENDMENT BUSINESS CORPORATION

Pursuant to §55-10-06 of the General Statutes of North Carolina, the undersigned corporation hereby submits the following Articles of Amendment for the purpose of amending its Articles of Incorporation.

	Article 1 of the Certificate of Incorporation is hereby deleted in its entirety and the following Article 1 is inserted
	in lieu thereof:
•	The name of the corporation (the "corporation") is:
	AMN SERVICES, INC.
ì	f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the
8	amendment, if not contained in the amendment itself, are as follows:  N/A
,	
1	The date of adoption of each amendment was as follows: June 15, 2005
(	Check either a, b, c, or d, whichever is applicable)
t	The amendment(s) was (were) duly adopted by the incorporators prior to the issuance of shares.  The amendment(s) was (were) duly adopted by the board of directors prior to the issuance of shares.  The amendment(s) was (were) duly adopted by the board of directors without shareholder action as shareholder action was not required because (set forth a brief explanation of why shareholder action was not required.)
•	

#### ARTICLES OF AMENDMENT Page 2

WORLDVIEW HEALTNCARE, INC.

Signature

Denise Jackson, Senior Vice President

Type or Print Name and Title

Name of Corporation

NOTES:

1. Filing fee is \$50. This document must be filed with the Secretary of State.