

P38875

ECP

EXTENDED CARE PRODUCTS, INC.

136 PRINCETON ROAD • JOHNSON CITY, TN 37601-2502 • PHONE 423-854-9115 • FAX 423-854-9566

June 19, 1997

400002220234--1
-06/23/97--01134--001
*****35.00 *****35.00

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

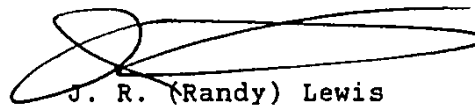
RE: Healthcare Financial and Consulting Services, Inc.
Document # P38875

Dear Sir/Madam:

The above referenced corporation has changed its name to Extended Care Products, Inc. Enclosed herewith is the completed amendment form, copy of the Tennessee corporation name change amendment certified by the Tennessee Secretary of State's office and a \$35.00 check covering the Florida filing fee.

Should you have any questions, please contact me at 423-854-9115. Thank you for your assistance.

Sincerely, ,


J. R. (Randy) Lewis
President

Attachment: Amendment Form
TN Form (Certificate)
\$35.00 Check

WP51\Corres\Randy\Letters\ECP.FL

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 JUN 23 AM 9:21
JUN 26 1997

97 JUN 23 AM 9:21

President
Title

ISSUANCE DATE: 06/13/1997
REQUEST NUMBER: 3352-0803

Secretary of State
Corporations Section
James K. Polk Building, Suite 1800
Nashville, Tennessee 37243-0306

CHARTER/QUALIFICATION DATE: 09/01/1988
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0206958
JURISDICTION: TENNESSEE

TO:
EXTENDED CARE PRODUCTS INC.
AT: J. R. LEWIS
136 PRINCETON RD
JOHNSON CITY, TN 37601-2502

REQUESTED BY:
EXTENDED CARE PRODUCTS INC.
AT: J. R. LEWIS
136 PRINCETON RD
JOHNSON CITY, TN 37601-2502

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"EXTENDED CARE PRODUCTS, INC."

WAS INCORPORATED OR QUALIFIED TO DO BUSINESS IN THE STATE OF TENNESSEE ON THE
ABOVE DATE, AND THAT THE ATTACHED DOCUMENT(S) WAS/WERE FILED IN OFFICE ON THE
DATE(S) AS BELOW INDICATED:

REFERENCE NUMBER	DATE FILED	FILING TYPE	FILING ACTION NAM DUR STK PRN OFC AGT INC MAL FYC X
3179-3015	06/07/1996	AMEND-CHARTER	

FOR: REQUEST FOR COPIES

ON DATE: 06/13/97

FEEs

FROM:
EXTENDED CARE PRODUCTS, INC.
136 PRINCETON ROAD
JOHNSON CITY, TN 37601-2502

RECEIVED: \$20.00 \$20.00
TOTAL PAYMENT RECEIVED: \$40.00

RECEIPT NUMBER: 00002145875
ACCOUNT NUMBER: 00256984



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE

ARTICLES OF AMENDMENT TO THE CHARTER

CORPORATE CONTROL NUMBER (IF KNOWN) 0206958

PURSUANT TO THE PROVISIONS OF SECTION 48-20-106 OF THE *TENNESSEE BUSINESS CORPORATION ACT*, THE UNDERSIGNED CORPORATION ADOPTS THE FOLLOWING ARTICLES OF AMENDMENT TO ITS CHARTER:

PLEASE MARK THE BLOCK THAT APPLIES:

- ☐ AMENDMENT IS TO BE EFFECTIVE WHEN FILED BY THE SECRETARY OF STATE.
- ☒ AMENDMENT IS TO BE EFFECTIVE, August 1 1996
MONTH DAY YEAR

(NOT TO BE LATER THAN THE 90TH DAY AFTER THE DATE THIS DOCUMENT IS FILED.) IF NEITHER BLOCK IS CHECKED, THE AMENDMENT WILL BE EFFECTIVE AT THE TIME OF FILING.

1. PLEASE INSERT THE NAME OF THE CORPORATION AS IT APPEARS ON RECORD: _____

Healthcare Financial And Consulting Services, Inc.

IF CHANGING THE NAME, INSERT THE NEW NAME ON THE LINE BELOW:

Extended Care Products, Inc.

2. PLEASE INSERT ANY CHANGES THAT APPLY:

A. PRINCIPAL ADDRESS: (street) _____

(city) (state) (zip code)

B. REGISTERED AGENT: _____

C. REGISTERED ADDRESS: (street) _____

(city) TN (state) (zip code) (county)

D. OTHER CHANGES:

3. THE CORPORATION IS FOR PROFIT.

4. THE MANNER (IF NOT SET FORTH IN THE AMENDMENT) FOR IMPLEMENTATION OF ANY EXCHANGE, RECLASSIFICATION, OR CANCELLATION OF ISSUED SHARES IS AS FOLLOWS:

5. THE AMENDMENT WAS DULY ADOPTED ON June 5 1996 BY _____
MONTH DAY YEAR

(NOTE: PLEASE MARK THE BLOCK THAT APPLIES)

☐ THE INCORPORATORS.

☐ THE BOARD OF DIRECTORS WITHOUT SHAREHOLDER APPROVAL, AS SUCH WAS NOT REQUIRED

☒ THE SHAREHOLDERS.

SIGNER'S CAPACITY

SIGNATURE

J. R. Lewis
NAME OF SIGNER (TYPED OR PRINTED)