DOC ID ----> 200711301518

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
04/24/2007	200711301518	DOMESTIC AGENT SUBSEQUENT APPOINTMENT (AGS)	25.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

PORTER, WRIGHT, MORRIS, ARTHUR
41 S. HIGH ST., 28TH FLOOR
COLUMBUS, OH 43215

STATE OF OHIO

CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

1178229

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

HEALTHLINX EXECUTIVE SEARCH, INC.

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
DOMESTIC AGENT SUBSEQUENT APPOINTMENT	**200711301518**

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 18th day of April, A.D. 2007.

Ohio Secretary of State

DOC ID ----> 200711301518

www.sos.state.oh.us
e-mail: busserv@sos.state.oh.us

Prescribed by:
The Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

Expedite this Form: (Select One)	
O Yes	PO Box 1390 Columbus, OH 43216
*** Requires an additional fee of $100 ***	
● No	PO Box 788 Columbus, OH 43216

STATUTORY AGENT UPDATE

(For Domestic or Foreign, Profit or Nonprofit)
Filing Fee $25.00

THE UNDERSIGNED DESIRING TO FILE A:

(CHECK ONLY ONE (1) BOX)

(1) Subsequent Appointment of Agent	(2) Change of Address of an Agent	(3) Resignation of Agent
☑ Corp ☐ LP (165-AGS)	☐ Corp ☐ LP (145-AGA)	☐ Corp ☐ LP (155-AGR)
☐ LLC (171-LSA)	☐ LLC (144-LAD)	☐ LLC (153-LAG)

Complete ALL of the general information in this section for the box checked above.

Name of Entity Healthlinx Executive Search, Inc.

Charter or Registration No. 1178229

Name of Current Agent Julie S. Berry

Complete the information in this section if box (1) is checked.

Name and Address of New Agent

Matthew P. Berry
(Name)
1404 Goodale Blvd., Suite 400
(Street) ***NOTE: P.O. Box Addresses are NOT acceptable.***

Columbus	Franklin	Ohio	43212
(City)	*(County)*	*(State)*	*(Zip Code)*

RECEIVED
SECRETARY OF STATE
2007 APR 18 PM 12: 22
BUSINESS SERVICES ENTER

ACCEPTANCE OF APPOINTMENT

The Undersigned, Matthew P. Berry, named herein as the Statutory agent for, Healthlinx Executive Search, Inc, hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: Matt
(Statutory Agent)

* If the entity listed is a foreign corporation, the agent does not have to sign the Acceptance of Appointment

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Complete the information in this section if box (2) is checked.

Old Address of Agent

_____
(Street) NOTE: P.O. Box Addresses are NOT acceptable.

_____ Ohio _____
(City) (State) (Zip Code)

New Address of Agent

_____
(Street) NOTE: P.O. Box Addresses are NOT acceptable.

_____ Ohio _____
(City) (State) (Zip Code)

Complete the information in this section if box (3) is checked.

Is this agent resigning? ☐ Yes ☐ No

Current or last known address of the entity's principal office where a copy of this Resignation of Agent was sent as of the date of filing or prior to the date filed

_____
(Street) NOTE: P.O. Box Addresses are NOT acceptable.

_____ _____ _____
(City) (State) (Zip Code)

REQUIRED
Must be authenticated (**signed**) by an authorized representative
(See Instructions)

Authorized Representative

4/17/07
Date