



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/31/2008	200836501140	DOMESTIC/AMENDED RESTATED ARTICLES (AMA)	50.00	.00	.00	.00	.00

Receipt

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

PILLAR MEDICAL ASSOCIATES
3045 SMITH ROAD
STE 700
FAIRLAWN, OH 44333

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner**1007714**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
PILLAR MEDICAL ASSOCIATES, INC.

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

Document(s)
DOMESTIC/AMENDED RESTATED ARTICLES

Document No(s):
200836501140



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 29th day of December,
A.D. 2008.

Ohio Secretary of State

**Prescribed by:**

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

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

Expedite this Form: (Select One)**Mail Form to one of the Following:**

- ☐ Yes PO Box 1390
 Columbus, OH 43216
 *** Requires an additional fee of \$100 ***
- ☒ No PO Box 1329
 Columbus, OH 43216

**Certificate of Amendment by
 Shareholders or Members
 (Domestic)
 Filing Fee \$50.00**

RECEIVED
 NOV 03 2008
 SECRETARY OF STATE

(CHECK ONLY ONE (1) BOX)

(1) Domestic for Profit ☒ Amended (122-AMAP)	PLEASE READ INSTRUCTIONS	(2) Domestic Nonprofit ☐ Amended (126-AMAN)	☐ Amendment (128-AMD)
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Complete the general information in this section for the box checked above.

Name of Corporation Pillar MedStaff

Charter Number 1007714

Name of Officer Kevin Foote

Title President

☐ Please check if additional provisions attached.

The above named Ohio corporation, does hereby certify that:

☒ A meeting of the ☒ shareholders ☐ directors (*nonprofit only*)

☐ members was duly called and held on 10/28/08
 (Date)

at which meeting a quorum was present in person or by proxy, based upon the quorum present, an affirmative vote was cast which entitled them to exercise 100 % as the voting power of the corporation.

☐ In a writing signed by all of the ☐ shareholders ☐ directors (*non-profit amended articles only*)
☐ members who would be entitled to the notice of a meeting or such other proportion not less than a majority as the articles of regulations or bylaws permit.

2008 DEC 29 AM 10:42

Clause applies if amended box is checked.

Resolved, that the following amended articles of incorporations be and the same are hereby adopted to supercede and take the place of the existing articles of incorporation and all amendments thereto.

All of the following information must be completed if an amended box is checked.
If an amendment box is checked, complete the areas that apply.

FIRST: The name of the corporation is: Pillar Medical Associates, Inc. KF

SECOND: The place in the State of Ohio where its principal office is located is in the City of:

Fairlawn

(city, village or township)

Summit

(county)

THIRD: The purposes of the corporation are as follows:

FOURTH: The number of shares which the corporation is authorized to have outstanding is: _____
(Does not apply to box (2))

REQUIRED

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

Authorized Representative

J. Kevin Foote

(Print Name)

10/30/08

Date

Authorized Representative

(Print Name)

Date