

State of Idaho

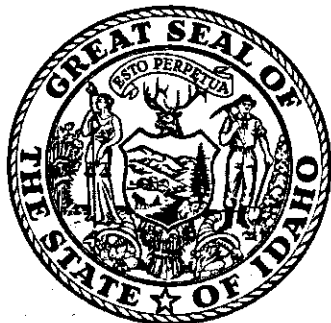
Office of the Secretary of State

**AMENDED CERTIFICATE OF AUTHORITY
OF
NATIONAL MEDICAL HEALTH CARD SYSTEMS, INC.
File Number C 162773**

I, BEN YSURSA, Secretary of the State, hereby certify that an Application for Amended Certificate of Authority, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Amended Certificate of Authority to reflect the name change from NATIONAL MEDICAL HEALTH CARD SYSTEMS, INC. to **INFORMEDRX, INC.** and attach hereto a duplicate of the application for such amended certificate.

Dated: June 12, 2008



Ben Yursa
SECRETARY OF STATE

By *Sally Lloyd*



APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY

(Instructions on back of application)

FILED EFFECTIVE

08 JUN 12 AM 11:04

SECRETARY OF STATE
STATE OF IDAHO

To the Secretary of State of the State of Idaho:

Pursuant to Section 30-1-1504, Idaho Code, the undersigned Corporation hereby applies for an amended certificate of authority to transact business in the State of Idaho and for that purpose submits the following statement. Complete only applicable items.

1. A Certificate of Authority was issued to the corporation by your office on: 10/06/2005
authorizing it to transact business in the State of Idaho under the name of:
National Medical Health Card Systems, Inc.
2. Its corporate name has been changed to: informedRx, Inc.
3. The name which it shall use hereafter in the State of Idaho is:
informedRx, Inc.
4. It has changed its jurisdiction of incorporation, without a change of corporate identity to: _____

Dated: June 4, 2008 Corporation Name: informedRx, Inc.

Signature: _____

Typed Name: Mark Thierer

Capacity: President

Customer Acct # :

(If using pre-paid account)

Secretary of State use only

IDAHO SECRETARY OF STATE

06/12/2008 05:00

CK: 94599 CT: 20168 BH: 1119453

1 @ 30.00 = 30.00 AMEND CERT # 2

1 @ 20.00 = 20.00 EXPEDITE C # 3

ST/comp/ncs/corp/amt
amended cert of authority.pdf
Revised 07/2002

C 162773

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE CERTIFICATE OF MERGER, WHICH MERGES:

"INFORMEDRX, INC.", AN ARIZONA CORPORATION,
WITH AND INTO "NATIONAL MEDICAL HEALTH CARD SYSTEMS, INC."
UNDER THE NAME OF "INFORMEDRX, INC.", A CORPORATION ORGANIZED
AND EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE, WAS
RECEIVED AND FILED IN THIS OFFICE THE TWENTY-FIRST DAY OF MAY,
A.D. 2008, AT 6:40 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID
CORPORATION SHALL BE GOVERNED BY THE LAWS OF THE STATE OF
DELAWARE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES
HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE
BEEN FILED TO DATE.

3472965 8330

080682634

You may verify this certificate online
at corp.delaware.gov/authver.shtml



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6651485

DATE: 06-11-08