

State of Idaho

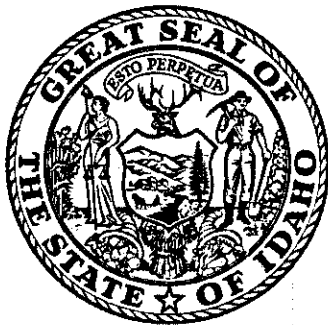
Office of the Secretary of State

**AMENDED CERTIFICATE OF AUTHORITY
OF
ARGENT HEALTHCARE FINANCIAL SERVICES, INC.
File Number C 150379**

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 ARGENT HEALTHCARE FINANCIAL SERVICES, INC. to **FIRSTSOURCE HEALTHCARE ADVANTAGE, INC.** and attach hereto a duplicate of the application for such amended certificate.

Dated: April 4, 2008



Ben Yursa
SECRETARY OF STATE

By _____



APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY

(Instructions on back of application)

08 APR -4 AM 8:30
SECRETARY OF STATE
STATE OF IDAHO

FILED EFFECTIVE

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: August 8, 2003
authorizing it to transact business in the State of Idaho under the name of:
Argent Healthcare Financial Services, Inc.
2. Its corporate name has been changed to: Firstsource Healthcare Advantage, Inc.
3. The name which it shall use hereafter in the State of Idaho is:
Firstsource Healthcare Advantage, Inc.
4. It has changed its jurisdiction of incorporation, without a change of corporate identity to: _____

Dated: 2/20/08 Corporation Name: Argent Healthcare Financial Services, Inc.

Signature: _____

Typed Name: Frank Stellato

Capacity: Chief Financial Officer

Customer Acct # :

(If using pre-paid account)

Secretary of State use only

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Revised 07/2002

Web Form

IDAHO SECRETARY OF STATE
04/04/2008 05:00
CK: 33799 CT: 182909 BH: 1108378
1 @ 38.00 = 38.00 AMEND CERT # 2

C150379

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "ARGENT HEALTHCARE FINANCIAL SERVICES, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "FIRSTSOURCE HEALTHCARE ADVANTAGE, INC.", THE TWENTY-FIRST DAY OF FEBRUARY, A.D. 2008, AT 4:38 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIRST DAY OF APRIL, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

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

3114865 8320
080380429



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 6491347

DATE: 04-01-08