State of Idaho

Office of the Secretary of State

AMENDED CERTIFICATE OF AUTHORITY

OF

PARALLON EMPLOYER, LLC

File Number W 109108

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 PARALLON EMPLOYER, LLC to PARALLON ENTERPRISES, LLC and attach hereto a duplicate of the application for such amended certificate.

Dated: July 10, 2012



Ben youra

SECRETARY OF STATE



APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY OF FOREIGN LIMITED LIABILITY COMPANY

2012 JUL 10 AM 11: 03

SECRETARY OF STATE STATE OF IDAHO

(Instructions on back of application)

1.		ame of the foreign limited liability company prior to this amendment is:
2.	If the foregiste	oreign limited liability company was required to adopt an assumed name in order to er in Idaho, the name the foreign limited liability company used in Idaho is:
3.	The da	ite the original application for certificate of authority was filed in Idaho:
4.	The ap follows	plication for certificate of authority for foreign limited liability company is amended as : (check one or more)
×	₫ a.	The name of the limited liability company has been changed to: Parallon Enterprises, LLC
		If the new name is not available or permissible in Idaho, the name to be used in Idaho is:
] b.	The LLC has changed its jurisdiction of registration, without a change of formation to:
	j c.	Otheramendment:
	~	
	Signatu person:	re of a manager, member or authorized Secretary of State use only
Sig	gnature	Dora A. Blackwood
Тур	ped Name	e Dora A. Blackwood
Ca	pacity	Authorized Person

IDANO SECRETARY OF STATE 97/10/2012 05:00 CX: 27092 CT: 20168 BH: 1331425 1 0 30.00 = 30.00 FOR LLC AN 1 2

W109108



STATE OF TENNESSEE Tre Hargett, Secretary of State

Division of Business Services

William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

July 5, 2012

CFS SUITE B 992 DAVIDSON DRIVE NASHVILLE, TN 37205

Control # 669569 Effective Date: 06/13/2012

Receipt #: 787624 Filing Fee: \$20.00

CERTIFICATE OF NAME CHANGE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that Articles of Amendment of **Parallon Employer**, LLC were filed in this office on the effective date noted above, changing the name to **Parallon Enterprises**, LLC.

Tre Hargett Secretary of State

Processed By: Kristen McClellan