

Filing Fee: \$50.00

ID Number: 000507960



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Division of Business Services
148 W. River Street
Providence, Rhode Island 02904-2615

STATE
DIVISION OF
JAN DEC 29 PM 2:51

LIMITED LIABILITY COMPANY

**AMENDMENT TO
APPLICATION FOR REGISTRATION**

Pursuant to the provisions of Section 7-16-52 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby (**check one box only**) ☐ corrects or ☒ amends its Application for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:

InforMed Medical Management Services, LLC

2. The statements in the application for registration were inaccurate when made or a change has occurred as follows:

THE COMPANY IS CHANGING ITS NAME FROM InforMed Medical Management Services, LLC to Conifer Care
Continuum Solutions, LLC The name to be used in Rhode Island is Conifer Care Continuum Solutions, LLC

3. The date this Amendment to the Application for Registration is to become effective, if later than the date of filing, is:

(not prior to, nor more than 30 days after, the filing of this Amendment to the Application for Registration)

Under penalty of perjury, I declare and affirm that I have examined this Amendment to Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 12-15-14

Conifer Care Continuum Solutions, LLC

Print Exact Name of Limited Liability Company Making Application

FILED

DEC 29 2014

By

Signature of Authorized Person

Stephen Mooney

Form No. 451
Revised: 05/12

BY CH 239339

2:54

STATE OF MARYLAND
Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT INFORMED MEDICAL MANAGEMENT SERVICES, LLC FILED ARTICLES OF AMENDMENT CHANGING IT'S NAME FROM INFORMED MEDICAL MANAGEMENT SERVICES, LLC TO CONIFER CARE CONTINUUM SOLUTIONS, LLC ON DECEMBER 18, 2014 AT 3:52 P.M.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS DECEMBER 22, 2014.

Paul B. Anderson

Paul B. Anderson
Charter Administrator



301 West Preston Street, Baltimore, Maryland 21201
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MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

CRTGST



State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly
executed in accordance with the provisions of Title 7 of the General Laws
of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

Secretary of State

