Filing Fee: \$50.00

ID Number: \_\_\_\_



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
148 W. River Street Providence, Rhode Island 02904-2615

## LIMITED LIABILITY COMPANY

## **ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION**

Pursuant to the provisions of Section 7-16-12 of the General Laws of Rhode Island 1956

The name of the limite	d liability company is:	
Abacus Health Solution	ns, LLC	
The Articles of Organiz	zation of the limited liability	company as amended or restated to date are amended as follows:
	[Ins	ert Amendment(s)]
	(If additional space is req	uired, please list on separate attachment)
"1. The name of the lim	ited liability company is:	AHS, LLC."
***		
		n the date of the filing of these Articles of Amendment, is:  vs after, the filing of these Articles of Amendment)
		vs after, the filing of these Articles of Amendment)  Under penalty of perjury, I declare and affirm that I have examined these Articles of Amendment, including any
(not prid	or to, nor more than 30 day	Under penalty of perjury, I declare and affirm that I have examined these Articles of Amendment, including any accompanying attachments, and that all statements contained
	or to, nor more than 30 day	Under penalty of perjury, I declare and affirm that I have examined these Articles of Amendment, including any accompanying attachments, and that all statements contained herein are true and correct.
(not prid	or to, nor more than 30 day	Under penalty of perjury, I declare and affirm that I have examined these Articles of Amendment, including any accompanying attachments, and that all statements contained herein are true and correct.  Abacus Health Solutions, LLC  Print Name of Limited Liability Company
(not prid	or to, nor more than 30 day	Under penalty of perjury, I declare and affirm that I have examined these Articles of Amendment, including any accompanying attachments, and that all statements contained herein are true and correct.  Abacus Health Solutions, LLC  Print Name of Limited Liability Company

Form No. 401 Revised: 07/07

I, NELLIE M. GORBEA, 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:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

