704556

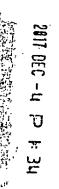
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DEBBIE - RA	IND MEMORIAL SERVICE LEAGUE, INC.
DOCUMENT NUMBER: 704556	
The enclosed Articles of Amendment and fee are subr	nitted for filing.
Please return all correspondence concerning this matter	er to the following:
Alexander Eremia	
	(Name of Contact Person)
Boca Raton Regional Ho	ospital, Inc.
0	(Firm/ Company)
800 Meadows Road	
	(Address)
Boca Raton, FL 3349	86
•	(City/ State and Zip Code)
aeremiaabrrh.com	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
Yngrid Palmer (Name of Contact Person	at 561 988 4503
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DEBBIE-RAND MEMORIAL SERVICE LEAGUE, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) 704556 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: , Florida (City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change X_Remove X_Add	<u>V</u> <u>Mil</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Edmund Nasralla	800 Meadows Road
Add			Boca Raton
X Remove			FL, 33486
2) X Change	P	Sherry Thomas	800 Meadows Road
Add		O	Boca Raton
Remove			FL,33486
3) Change	VP	Robert Schattner	800 Meadows Road
			Boca Raton
Remove			FL,33486
4) Change	AT	Victor Shames	800 Meadows Road
_X Add			Boca Raton
Remove			FL, 33486
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	icles, enter chan (Be specific)				
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The	e date of each amendment(s) a e this document was signed.	May 1, 2017	, if other than the
Effe	ective date <u>if applicable</u> :		
	•	(no more than 90 days after amendment file date)	
	ee: If the date inserted in this blument's effective date on the De	ock does not meet the applicable statutory filing requirements, this department of State's records.	ite will not be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
囡	The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the amendnal.	ient(s)
	There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/vors.	vere
	Dated(2/1/17	
	Signature	July 1	
	(By the chai have not be	rman of vice plairman of the board, president or other officer-if dire en selected, by an incorporator – if in the hands of a receiver, trusted appointed fiduciary by that fiduciary)	ctors ;, or
		Sergio A. RodriGUEZ	<u>.</u>
		(Typed or printed name of person signing)	
		(majorer	
		(Title of person signing)	