## 705162

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	Variety Children's Ho	ospital			
DOCUMENT NUMBER;	705162			•	
The enclosed Articles of An	nendment and fee are subm	nitted for filing.			
Please return all correspond	ence concerning this matte	r to the following:			
April Andrews-Singh					
		(Name of Contact Perso	on)		
Miami Children's Health Sy	stem, Legal Department				
		(Firm/ Company)			
3100 SW 62 Avenue					
		(Address)			
Miami, FL 33155					
		(City/ State and Zip Co	de)		10110400000
corporate.governance@mcl	ı.com				
E	-mail address: (to be used	for future annual report	notification	1)	
For further information conc	erning this matter, please	call:			
Josee Chin	786-6242518				
	(Name of Contact Person)	at (A	rea Code)	(Daytime Telepho	one Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida Dep	partment of S	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is used)	
N. A 212	4.4	Ο.			

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

Variety Children's Hospital		
(Name of Corporation as current	ntly filed with the Florida D	ept. of State)
705162		
(Document Num	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statut mendment(s) to its Articles of Incorporation:	es, this Florida Not For Prof	Tit Corporation adopts the following
. If amending name, enter the new name of the corpora	tion:	
		The new
name must be distinguishable and contain the word "corpord" (Company" or "Co." may not be used in the name.	ation" or "incorporated" or t	he abbreviation "Corp." or "Inc."
3. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u>		
	<del></del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
<ol> <li>If amending the registered agent and/or registered offi new registered agent and/or the new registered office</li> </ol>		the name of the
Name of New Registered Agent:	<del></del>	
The of the Regulered Tigeth.		
	(Florida s	treet address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
	. , ,	* * /

Signature of New Registered Agent, if changing

## 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change		_	
Add			
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		<del></del>	
Remove			

(attach additional sheets, if necessary). (Be specific)
AMEND Article IX-The officers of the corporation shall apply to the proper authority of the State of Florida for amendment
of these Amended and Restated Articles of Incorporation in accordance with state law, after a proposed amendment has been
duly approved by seven (7) or one third (1/3) of the entire Board of Directors entitled to vote, whichever is greater,
provided that a notice shall have been sent to each member of the Board at least seven (7) days prior to said meeting stating
the proposed amendment, and provided, further, that such amendment is approved by the Member.
·

E. If amending or adding additional Articles, enter change(s) here:

Γhe	date of each amendment(s) ado	ption:	, if other than the
date	this document was signed.	,	
Effe	ective date if applicable:		
		(no more than 90 days after amendment file date)	
	e: If the date inserted in this block ument's effective date on the Department.	k does not meet the applicable statutory filing requirements, this date will rartment of State's records.	not be listed as the
Ado	option of Amendment(s)	( <u>CHECK ONE</u> )	
	The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	
	There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were s.	
	Dated September 2	22, 2015	
	Signature	Mu	
	have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
	M. Narend	Ira Kini	
		(Typed or printed name of person signing)	
	President a	& CEO	
		(Title of person signing)	