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ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF THE ORANGE COUNTY MEDICAL SOCIETY OF FLORIDA, INCORPORATED

Pursuant to the provisions of Section 617.1006, Pla. Stat., the ORANGE COUNTY MEDICAL SOCUETY OF FLORIDA, INCORPORATED (the "Society"), a corporation not for profit organized under the laws of the State of Plorida with Charter No. t714103, through the signature of its President and Secretary hereby certify that the action set forth herein was taken by the voting members of the Society, to approve the following amendments to the Articles of Incorporation, pursuant to and in accordance with Articles of Incorporation and the Society Bylaws, where a duly called meeting occurred on \$/31/2019, and that the President and Secretary were directed to file Articles of Amendment to reflect the changes approved by the members of the Society at such meeting. The changes so approved by the members of the Society are set forth below.

1. Article IIa, is hereby deleted and replaced in its entirety to read:

 To bring in medical doctors, including osteopathic physicians, of Central Florida into the organization to promote the science and art of medicine and the betterment of public health;

ORANGE COUNTY MEDICAL SOCIETY

POORIDM, INCORPORATED

Darin Wolfe, M.D., President

2. In Article III the reference to "Orange or Osceola Counties" is hereby deleted and replaced with "Central Florida."

IN WITNESS WHEREOF, the Orange County Medical Society of Florida has caused the foregoing amendments to be signed in its name by the President and attested to by its Secretary this 31st day of August, 2019.

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By

Sanjay Pattani, M.D., Secretary

STATE OF FLORIDA

COUNTY OF ORANGE

Sworn to (or affirmed) and subscribed before me this <u>2</u> day of August, 2019, by Darin Wolfe, M.D., and Sanjay Pattani, M.D., as President and Secretary, respectfully, of the Orange County Medical Society of Florida, Incorporated, a Florida not-for-profit corporation, on behalf of the porporation. They are personally known to me or who have produced ________ and who did take at oath.

My commission Expires: JUNC 24

AFFIX NOTARY SEAL



Signature of notar ania Name: Notary Pub State of Florida 660 16 Commission Number

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