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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION ADDICE PORK Madical Acult |
|---|
| NAME OF CORPORATION: ORANGE PARK Medical CONTO |
| DOCUMENT NUMBER: 73//33 |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| MARGUERITO KIOTOR (Name of Contact Person) |
| O.P.M.a. AuxiLiary (Firm/ Company) |
| 2001 KINGSley AVE. (Address) |
| ORANGE PARK, FL 32073 (City/ State and Zip Code) |
| For further information concerning this matter, please call: |
| MARGUERITE KIOTER at (904) 373-9199 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$\square\$ \$\squa |
| Mailing Address Amendment Section Street Address Amendment Section |

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment to Articles of Incorporation of

ORANGE PARK MEDICAL CENTER AuxiLIARY INC (Name of corporation as currently filed with the Florida Dept. of State)

(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:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may <u>not</u> be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

<u> Mission</u> ⊃

The mission of the Auxiliary shall be to render aid and comfort to the patients of Orange Park Medical Center, to offer assistance to patients' families and all visitors of the Hospital and to promote good will for the Hospital through charitable endeavors that benefit patients within the service area of the Hospital through ways approved or proposed by the Governing Board of the Hospital.

WE HAVE CHANGED THE STUCTURE OF OUR BOARD TAS IT IS NOW:

President
President-Elect
1st Vice President
2nd Vice President
Corresponding Secretary
Recording Secretary
Treasurer

(Attach additional pages if necessary)

| The date of adoption of the amendment(s) was: $\frac{\partial \omega}{\partial s}$ |
|--|
| Effective date if applicable: |
| (no more than 90 days after amendment file date) |
| |
| Adoption of Amendment(s) (CHECK ONE) |
| The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval. |
| There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors. |
| Signature May May Later Kately (By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) |
| MARGUERITE Kloter (Typed or printed name of person signing) |
| TREASURER (Title of person signing) |

FILING FEE: \$35