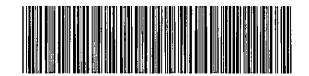
## F0300001094

(Re	equestor's Name)	·		
(Ad	ldress)			
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PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nar	me)		
(Do	ocument Number)			
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SECRETARY OF STATE ALLAHASSEE, FLORIDA FILED

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: PremierCa	re Texas, Inc.	
DOCUMENT NUMBE	ER:F030000010	94	
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
· –	<u>Kevin Barkma</u>		
		Name of Contact Perso	on .
_	United Medic	al Corporation	
		Firm/ Company	
	603 Main Str	eet	
		Address	
_	Windermere,	FL 34786	
		City/ State and Zip Cod	le
	kbarkman@uni E-mail address: (to be us	tedmedical.com sed for future annual report	notification)
	2	ver to ratare annual report	
Ear forther information			
roi tuttici information	concerning this matter, pleas	e can:	
Kevin Bar	kman	at ( 407	× 876_2200
	Contact Person		ode & Daytime Telephone Number
. runic or	Contact i cison	Area Co	de le Daytine Pelephone (Vanio)
Enclosed is a check for t	the following amount made p	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Division P.O. B	ng Address dment Section on of Corporations sox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

PremierCare Tex	as, Inc.		
(Name of C	Corporation as curre	ntly filed with the Florida Dept.	of State)
F03000001094			
	(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	6, Florida Statutes, th	nis Florida Profit Corporation ado	pts the following amendment(s) to
A. If amending name, enter the new name	of the corporation:		
Ten Broeck Texa			The new
name must be distinguishable and contain "Corp" "Inc.," or Co.," or the designation word "chartered," "professional association	on "Corp," "Inc," oi	r "Co". A professional corporati	ited" or the abbreviation on name must contain the
B. Enter new principal office address, if a (Principal office address MUST BE A STRE		N/A	
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF)  D. If amending the registered agent and/or new registered agent and/or the new re	FICE BOX) r registered office ad	Idress in Florida, enter the name	of the
Name of New Registered Agent	N/A		POI
New Registered Office Address:	(Fiorida . N/A_	street address), F	Control Juli
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	ging Registered Ager agent. I am familia	nt: r with and accept the obligations o	f the position.
N/		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	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		_	
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

•	t necessary).	les, enter change (Be specific)				
N/A						
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<del></del>	<del>_</del>	<del></del>		<del></del>		
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- 1 - 1		<del>-</del>				
f an amendment provides	s for an exchai	nge, reclassificat	ion, or cancellati	on of issued shar	es,	
provisions for implement (if not applicable, indi	<u>ing the amenc</u> icate N/A)	iment if not cont	ained in the ame	ndment itself:		
N/A						
	VC=-		<del>_</del>			
		<del></del>			<del></del>	·
			-			
		-				

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable:6/14/18	
Effective date if applicable: 6/14/18 (no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature Arim Bulgunau	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	-
Kevin Barkman (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Executive Vice President/Secretary	
(Title of person signing)	- <del></del>