

FD800000147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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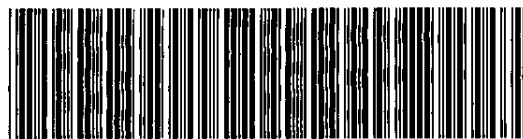
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]

[Handwritten initials]

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sisters of St. Francis Health Services, Inc.
Name of Corporation

DOCUMENT NUMBER: F08000000147

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sister M. Corita Last, O.S.F.
Name of Contact Person

Sisters of St. Francis Health Services, Inc.
Firm/Company

1515 Dragoon Trail
Address

Mishawaka, IN 46546
City/State and Zip Code

Sister.Corita@ssfhs.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sister M. Corita Last, O.S.F. at (574) 254-6253
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|---|
| <input checked="checked" type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
|---|---|--|---|

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

**NOT FOR PROFIT CORPORATION
APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION TO FILE
AMENDMENT TO APPLICATION FOR CONDUCTING AFFAIRS IN FLORIDA**
(Pursuant to s. 617.1504, F.S.)

**SECTION I
(1-3 MUST BE COMPLETED)**

F08000000147

(Document Number of Corporation (If known))

1. Sisters of St. Francis Health Services, Inc.
(Name of corporation as it appears on the records of the Department of State)
2. Indiana 3. January 15, 2008
(Incorporated under laws of) (Date authorized to conduct affairs in Florida)

**SECTION II
(4-8 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? November 22, 2010

5. Franciscan Alliance, Inc.
(Name of corporation after the amendment, adding suffix "corporation," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation. "Company," or "Co.," may not be used as a corporate suffix by a nonprofit corporation)

6. If the amendment changes the period of duration, indicate new period of duration and the date the change was effected.

(New duration) (Date)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction and the date the change was effected.

(New jurisdiction) (Date)

8. If the purpose which the corporation intends to pursue in Florida has changed, indicate new purpose.

(The corporation is authorized to pursue such purpose in the jurisdiction of its incorporation)

9. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Sister M. Corita Last, O.S.F.
(Signature of the chairman or vice chairman of the board, president, or other officer - if in the hands of a receiver, trustee, or other court-appointed fiduciary, by that fiduciary)

Sister M. Corita Last, O.S.F.
(Typed or printed name of the person signing)

Corporate Secretary
(Title of person signing)

FILED
2010 DEC 30 PM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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RECEIVED 11/22/2010 02:41 PM

APPROVED AND FILED
TODD ROKITA
INDIANA SECRETARY OF STATE
11/22/2010 2:41 PM

ARTICLES OF AMENDMENT

Formed pursuant to the provisions of the Indiana Nonprofit Corporation Act of 1991.

Article I - ENTITY NAME

SISTERS OF ST. FRANCIS HEALTH SERVICES, INC.

Creation Date: 9/19/1974

PRINCIPAL OFFICE ADDRESS

1515 DRAGOON TRAIL PO BOX 1290, MISHAWAKA, IN 46546

REGISTERED OFFICE AND AGENT

KEVIN D. LEAHY
1515 DRAGOON TRAIL, MISHAWAKA, IN 46544

OFFICERS AND BOARD OF DIRECTORS

KEVIN D LEAHY
President
1515 Dragoon Trail, MISHAWAKA, IN 46546

GENERAL INFORMATION

Adoption Date: 11/5/2010
Effective Date: 11/22/2010
Electronic Signature: SISTER M. CORITA LAST, O.S.F.
Signator's Title: CORPORATE SECRETARY

MANNER AND ADOPTION OF VOTE

Unanimous written consent executed on the following date and signed by all members entitled to vote:

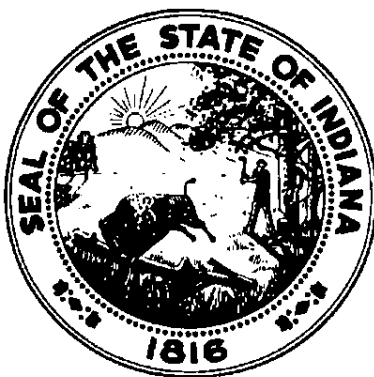
11/5/2010

The Indiana Secretary of State filing office certifies that this copy is on file in this office.

State of Indiana
Office of the Secretary of State
CERTIFICATE OF AMENDMENT
of
SISTERS OF ST. FRANCIS HEALTH SERVICES, INC.

I, Todd Rokita, Secretary of State of Indiana, hereby certify that Articles of Amendment of the above Non-Profit Domestic Corporation has been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Nonprofit Corporation Act of 1991.

NOW, THEREFORE, with this document I certify that said transaction will become effective Monday, November 22, 2010.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, November 22, 2010

A handwritten signature in black ink that reads "Todd Rokita".

TODD ROKITA,
SECRETARY OF STATE

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The Indiana Secretary of State filing office certifies that this copy is on file in this office.

ADDITIONAL ARTICLES

Article I : THE NAME OF THE CORPORATION IS FRANCISCAN ALLIANCE, INC.