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SECTARY OF STATE
AFFARSSEE, FLORID

COVER LETTER
TO: Amendment Section Division of Corporations  COVERLETTER  COUNTY 1148
NAME OF CORPORATION: Basic Trauma Life Support Florida Chapter
DOCUMENT NUMBER: 49664
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LINDA FOX (Name of Contact Person)
Basic Trauma Life Support (Firm/Company)
3717 S. Conway Rd (Address)
Orlando F1 32812-7607 (City/State and Zip Code)
For further information concerning this matter, please call:
LINDA FOX at (407) 482-1887 × 13  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Certificate of Status  Certificate of Status  Certificate of Status  (Additional copy is enclosed)  Certificate of Status  (Additional Copy is enclosed)  Certificate of Status  Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## Articles of Amendment to

BASIC Trauma Life Support Florida Chapter

(Name of corporation as currently filed with the Florida	a Dept. of State)		
(Document number of corporation (if know	Vn)	<del></del> .	en e
Pursuant to the provisions of section 617.1006, Florida Statutes, a Corporation adopts the following amendment(s) to its Articles of		For Profit	
NEW CORPORATE NAME (if changing):	INC.		
International Trauma Life Supp	onth Floring	da Chai	oter
(must contain the word "corporation," "incorporated," or the abbreviation "corlanguage; "Company" or "Co." may not be used in the name of a not for prof	p." or "inc." or wor	ds of like impor	in
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AMENDMENTS ADOPTED- (OTHER THAN NAME CHAIN Number(s) and/or Article Title(s) being amended, added or delete	NGE) Indicate A	article (C)	
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(Attach additional pages if necessary)	4 ,	<del> </del>	· · ·
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(continued)

The date of adoption of the amendment(s) was:
Effective date if applicable: \( \) - \( \) \( \
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  (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.)
Chapter Co-Ordinator/Executive Committee
(Title of person signing)

FILING FEE: \$35