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4.

Account#: I20000000088

Date:	11/30/2018	
Name:	MICHAEL PETERSON	
Referenc	ce #:1019112	
	ame: BREVARD HM	A HOSPICE, LLC
ıA 🔲	rticles of Incorporation/Authorization to	Transact Business
<b>₽</b> At	mendment	
☐ Ci	hange of Agent	
☐ Re	einstatement	
☐ C	onversion	
<u></u> М	lerger	
☐ Di	issolution/Withdrawal	
☐ Fi	ictitious Name	
	ther	
Authorize Signature	et Amount: #25.00	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BREVARD HMA HO	SPICE, LLC		
(Name of the Limited Liability Company as (A Florida Limited Liabili	il now anneam on o ty Company)	our records.)	
The Articles of Organization for this Limited Liability Company were Florida document numberL10000078368	filed on	3/2/2017	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	company here:		
The new name must be distinguishable and contain the words "Limited Liability Co	mpany," the design	stion "LLC" or the abi	breviation "L.L.C."
Enter new principal offices address, if applicable:	001 Hugh Mallin Bood South		d South
(Principal office address MUST BE A STREET ADDRESS)	1 -44- 1 4 70500		508
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			
	· ·-		2018 14.LL
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our	records, <u>enter</u>	the name of the new
Name of New Registered Agent:		<u>.</u>	- For 2-1
New Registered Office Address:	Enter Florida st	reet address	<u> </u>
		, Florida	
	Citu		Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

## FILEC

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

Title	<u>Name</u>	Address	Type of Action
President	Keith G. Myers	901 Hugh Wallis Road South	
		Lafayette, LA 70508	□ Remove
			Change
Treasurer	Joshua L. Proffitt	901 Hugh Wallis Road South	]_lisAdd
		Lafayette, LA 70508	P. GRemove
			#Change
SR VP, Becretary	Guenthner, C. Steven	9510 Ormsby Station Road Suite 30	SSEE AND AM
		Louisville, KY 40223	E comove
			_⊞ Change
VP	Lyles, Patrick Todd	9510 Ormsby Station Road Suite 30	ObA ⊡
		Louisville, KY 40223	_i_iKemove
			_: Change
VP	Sandra Hogston	9510 Ormsby Station Road Suite 30	0 _⊑ Add
		Louisville, KY 40223	r Remove
			_
<u>VP</u>	Cathy Pedigo	9510 Ormsby Station Road Suite 30	O _⊯ Add
		Louisville, KY 40223	_© Remove
			_C Change

		ove Jeff Reibel - Title VP	
	Remove Da	niel Schwartz - Title SR VP	P, COO
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			33
(If an effective d Note: If the	te, if other than the date of late is listed, the date must be special date inserted in this block does effective date on the Department	fic and cunnot be prior to date of filing or more than 90 not meet the applicable statutory filing requiren	(optional) days after filing.) Pursuant to 605.0207 (3)(b) eents, this date will not be listed as the
f the record s b) The 90th	specifies a delayed effect day after the record is f	ive date, but not an effective time, at iled.	12:01 a.m. on the earller of:
Dated	11/13		
	<u> </u>	100	
_	Signature	of a member or authorized representative of a memb	er
	V	<b>^ ^ ^ ^ * * * * * * * * * *</b>	

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