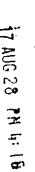
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Account#: I20000000088

Date: 08/28/2017		Account#. 12000000000
Name: Merritt Knickle	<u>e</u>	
Reference #: T0117	95	
Entity Name: SOUTH DAD	E PRIMARY CARE, LI	LC
Articles of Incorporation/A	uthorization to Transact Busir	iess
✓ Amendment		
☐ Change of Agent		
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Authorized Amount: \$5' Signature: \(\lambda \) \(\lambda \) \(\lambda \)	· · · · · · · · · · · · · · · · · · ·	

PLOORPORATE HQ COGENCY GLOBAL INC 10 E 40 ST, 10 FL NY, NY 16016 800.221.0102 -1.212.947.7200 FEUROPEAN HQ

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Account#: I20000000088

Date: 08/28/2017		ACCOUNT. 12000000000
Name: Merritt Knickle		
Reference #:		
Entity Name: SOUTH DADE PE	RIMARY CARE, LL	<u>.c</u>
Articles of Incorporation/Authoriz	ation to Transact Busin	ess
✓ Amendment		
Change of Agent		
Reinstatement		
Conversion		
Merger		
☐ Dissolution/Withdrawal		
Fictitous Name		
✓ Other	Certified Copy	
Authorized Amount: \$55		
Signature: Wenny Kurck	و ا	; -

* CORPORATE HQ COGENCY GLOBAL INC ID E 40 ST, 10 FL HY NY 10016 800.221.0102 -1.212.947.7200 ■ EUROPEAN HQ COGENCY GLOBAL (UK) HMHED REGISTRED HENGLAND & WALES REGISTAL ADD 77 6 BEVIS MARKS, 14FL LONDON EC3A 73A +44 (0)20.3786.1690 ASIA PACIFIC HQ
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 HONG KONG
 -852,3975,1803



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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	I DADE PRIMARY CARE, LLC	
(Name of the Limited Linbilit (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number L1700013229		and assigned
This amendment is submitted to amend the following:	<u> </u>	
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		r the name of the no
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	(O
	, Florida _	7:- (-1- /)
	Cin	Lip 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

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Leonard A. Zimmerman, MD	7540 SW 61, Ave, South Miami, FL 33145	
			Remove
		· · · · · · · · · · · · · · · · · · ·	Change
CEO	Roberto L. Palenzuela	7540 SW 61, Ave, South Miami, FL 33145	
			Remove
			Change
MGRM	Mark A. Zager, MD	7540 SW 61, Ave, South Miami, FL 33145	
			■ Remove
			Change
CFO	Peter Zuckoff	7540 SW 61, Avc, South Miami, FL 33145	
			□ Remove
			Change
MGRM	Ramon Leon, MD	7540 SW 61, Ave, South Miami, FL 33145	🗆 Add
			Remove
			Change
P/COO	Jose A. Guethon MD MBA	7540 SW 61, Ave, South Miami, FL 33145	<u>·</u> FB Add
			Remove =
			Change

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Tective date, if other than the	date of filing:	(optic	onal)
in effective date is listed, the date mu	the specific and cannot be prior to	(option of the of filing or more than 90 days after ble statutory filing requirements, this	filing.) Pursuant to 605,020 date will not be listed a
ocument's effective date on the D	epartment of State's records.		
record specifies a delayed The 90th day after the rec		an effective time, at 12:01 a	.m. on the earlier o
The sources are the sec	ora is mea.		
ited August 28	2017		13
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<u> </u>	cle) à 1- alme	12,40	<u> </u>
	Signature of a member or author	nzeo representative of a member	C.3
Debra Palmisano, Auth	orized Representative of the N	tember	; <u>ā</u>
	Typed or printed	I name of signee	 ი

Page 3 of 3

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