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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Public Health Institute of the Miami-Dade County Health Department, Inc.

**DOCUMENT NUMBER:** N01000006517

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lillian Rivera, RN, MSN

(Name of Contact Person)

Miami-Dade County Health Department

(Firm/ Company)

8323 NW 12 Street, Suite 212

(Address)

Miami, Florida 33126

(City/ State and Zip Code)

For further information concerning this matter, please call:

Lillian Rivera, RN, MSN

(Name of Contact Person)

at ( 786 ) 336-1274

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$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)

**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

**ARTICLES OF AMENDMENT TO  
ARTICLES OF INCORPORATION OF  
PUBLIC HEALTH INSTITUTE OF  
THE MIAMI-DADE COUNTY HEALTH DEPARTMENT, INC.**

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendments to its Articles of Incorporation:

I. ARTICLE I, NAME OF THE CORPORATION is hereby amended to read:

The name of the corporation is the Florida Public Health Institute, Inc. ("Corporation").

II. ARTICLE II, PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS is hereby amended to read:

The principal place of business for the Corporation is: 8323 Northwest 12 Street, Suite 212, Miami, Florida.

The mailing address for the Corporation is:  
Florida Public Health Institute, Inc.  
8323 N.W. 12 Street, Suite 212  
Miami, Florida 33126

III. ARTICLE VI, NAMES AND ADDRESSES OF DIRECTORS is hereby amended to read:

The Corporation shall have no voting members. The management and affairs of the Corporation shall be at all times under the direction of a Board of Directors, whose operations in governing the Corporation shall be defined by statute and by the Corporation's By-Laws. No Board member shall have any right, title, or interest in or to any property of the Corporation.

There will be five (5) Board Members constituting the Board of Directors, their names and address being as follows:

H. Virginia McCoy, PhD, Director  
Stempel School of Public Health  
Director, Outreach & Public Health Practice  
11200 SW 8th Street (HLSII 595)  
Miami, FL 33199

Clyde B. McCoy, PhD, Director  
Department of Epidemiology and Public Health  
1801 NW 9 Avenue  
Highland Professional Building, Suite 300  
Miami, FL 33136

Olga Connor, Director  
Miami-Dade County Health Department  
8323 NW 12 Street, Suite 212  
Miami, Florida 33126

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Dr. Jean Malecki, Director  
Director of the Palm Beach County Health Department  
826 Evernia  
West Palm Beach, Florida 33401

James T. Howell, MD, MPH, Director  
Chair Department of Rural Medicine  
Nova Southeastern University  
College of Osteopathic Medicine  
3200 South University Drive  
Ft. Lauderdale, FL 33328

IV. ARTICLE VIII, REGISTERED AGENT is hereby amended to read:

The street address in the State of Florida of the registered office of the Corporation is: 8323 NW 12 Street, Suite 212, Miami, Florida 33126, and the name of the registered agent at such address is Lillian Rivera.

V. ARTICLE X, COMMITTEES is hereby added to read:

The Corporation will establish a committee named the Southeast Academic Enterprise. The Corporation will also support other Florida committees, whose purpose furthers the interests and goals of the Corporation.

The date of adoption of this amendment was: May 12, 2006 and is effective immediately.

These amendments were adopted by the Board of Directors and the number of votes cast for the amendments was sufficient for approval. There are no voting members entitled to vote on this amendment.


IN WITNESS WHEREOF, the undersigned has caused these Articles of Amendment to

be signed by a duly authorized officer thereof this 23 day of May, 2006.

Florida Public Health Institute, Inc.

  
\_\_\_\_\_  
Olga Connor, Director

I hereby accept the duties and responsibilities of registered agency and am familiar with the obligations of the position.

  
\_\_\_\_\_  
Lillian Rivera, RN, MSN