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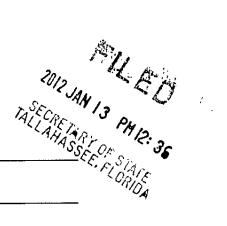
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COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations		
NAME OF CORPORATION: Rural Wom	en's He	alth Project, Inc
DOCUMENT NUMBER: NO1000073	98	
The enclosed Articles of Amendment and fee are submitted	for filing.	
Please return all correspondence concerning this matter to th	e following:	
Fran Ricardo		
(Name	e of Contact Person)
Rural Women's Health P	roject, Ir	nc
(H	Firm/ Company)	
1108 S.W. 2nd Ave.		
	(Address)	
Gainesville, FL 32601		
(City/	State and Zip Code	2)
rwhp@cafl.com		
E-mail address: (to be used for fu	ture annual report r	notification)
For further information concerning this matter, please call:		
Fran Ricardo	_{at} 352	372-1095
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made payable	to the Florida Depa	rtment of State:
	py Certi ditional copy is	ficate of Status Certified Copy
enclosed)	(Additional C	opy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle
	Tallaha	ssee, FL 32301

Articles of Amendment to Articles of Incorporation of



Rural Women's Health Project, Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

N01000007398

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

N/A	The
name must be distinguishable and contain the word "corpo	oration" or "incorporated" or the abbreviation "Corp." or " i
"Company" or "Co," may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES)	<u>N/A</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered of new registered agent and/or the new registered offic	office address in Florida, enter the name of the
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent: N/A	office address in Florida, enter the name of the ce address:
new registered agent and/or the new registered offic	office address in Florida, enter the name of the ce address: (Florida street address)
new registered agent and/or the new registered office Name of New Registered Agent: N/A	(Florida street address)
new registered agent and/or the new registered office Name of New Registered Agent: N/A	ce address: (Florida street address) , Florida

Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change X Add Remove	D	Manoucheka Celeste	4014 Ashford Green Place #202 Tampa, FL 33613.
2) Change Add Remove	***		
3) Change Add Remove		_	
4) Change Add Remove			
5) Change Add Remove		<u> </u>	
6) Change Add Remove			

If amending or adding additional A (attach additional sheets, if necessary,). (Be specific)				
I/A					
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The date of each amendment(s) adoption:			
Effec	ctive date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)		
Adop	otion of Amendment(s) (<u>CHECK ONE</u>)		
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.		
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.		
	Dated January 10, 2012 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)		
	Fran Ricardo		
	(Typed or printed name of person signing)		
	Vice President		
	(Title of person signing)		