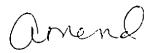
N06456

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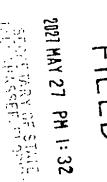
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COVER LETTER

TO: Amendment Section Division of Corporations

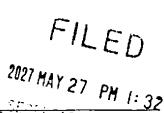
NAME OF CORPORATI	Cape Canaveral Hos ON:	spital. Inc.			
DOCUMENT NUMBER:	N06456				
DOCUMENT NUMBER:					_
The enclosed Articles of Art	nendment and fee are sub	mitted for filing.			
Please return all correspond	ence concerning this matt	er to the following:			
Tracy G. Cummings					
		(Name of Contact Po	erson)		_
Health First Shared Service	s. Inc.				
		(Firm/ Company	y)		_
6450 US Highway 1					
		(Address)		<u> </u>	_
Rockledge, FL 32955					
		(City/ State and Zip	Code)		_
tracy.cummings@hf.org					
	E-mail address: (to be used	d for future annual rep	port notification	n)	_
For further information con	cerning this matter, please	e call:			
Tracy Cummings		at	321	434-4182	
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)	_
Enclosed is a check for the	following amount made p	ayable to the Florida	Department of	State:	
≡ \$ 35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing	1 ddraec	Ç.	root Address		

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address
Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



Cape Canaveral Hospital, Inc.

Cape Canaverar Hospital, Inc.		s_{res}
(Name of Corporation as currently filed with the Flori	da Dept. of State)	THE ABIGRY OF SE
N06456		TARSEC FLORIS
(Document No	umber of Corporation (if I	known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not F</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
N/A		The new
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	ooration" or "incorporate	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRE	<u>ESS</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		i, enter the name of the
new registered agent and/or the new registered offi	<u>ce address:</u>	
Name of New Registered Agent: N/A		
		Vlorīda street address)
<u>New Registered Office Address:</u>		
N/A		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe	red Agent:	
I hereby accept the appointment as registered agent. I ar		t the obligations of the position.

Signature of New Registered Agent, if changing

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.

Type of Action (Check One) Title Name Address Change Add Remove Change Add Add Remove Change Add Add Add Add Add Remove Change Add Add Add Add Add Add Add Add Add Ad	
Add	
2)Change	
	_
3) Change	<u> </u>
Add	<u>-</u>
5) Change	
	_
Remove	_
6) Change	<u> </u>
Remove	_
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
Article IV (Member) - Delete language under Article IV and replace with the following:	
The sole member of the Corporation shall be Health First Shared Services, Inc., a Florida not-for-profit corporation.	
Article VII (Trustees) - delete and replace the language under Section 7.1 (Number) with the following: 7.1 Number: The affairs of the Corporation are to be managed by a Board of Trustees, which shall consist of such	—

number of Trustees as specified in the Bylaws of the Corporation.	
· · · · · · · · · · · · · · · · · · ·	
	
	<u>.</u>
	
	
	
	
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The date of each amendment(s) adoption: May 20, 2021, if date this document was signed.	fother than the
Effective date if applicable: September 30, 2020	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ladocument's effective date on the Department of State's records.	isted as the
Adoption of Amendment(s) (CHECK ONE)	

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 May 20, 2021 Signature May 20, 2021
(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)
Nicholas W. Romanello
(Typed or printed name of person signing)
Assistant Secretary

(Title of person signing)