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| PICK-UP WAIT MAIL |
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2022 FEB -8 PM 1:40 SECRETATION SETATE

y 2/17/2022

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Health First 1 | Health Plans, Inc. |
|---|---|
| N15000000054 DOCUMENT NUMBER: | |
| The enclosed Articles of Amendment and fee | are submitted for filing. |
| Please return all correspondence concerning th | nis matter to the following: |
| Tracy G. Cummings | |
| | (Name of Contact Person) |
| Health First Shared Services, Inc. | |
| | (Firm/ Company) |
| 6450 US Highway I | |
| | (Address) |
| Rockledge, FL 32955 | |
| | (City/ State and Zip Code) |
| tracy.cummings@hf.org | |
| E-mail address: (to | be used for future annual report notification) |
| For further information concerning this matter. | , please call: |
| Tracy G. Cummings | 321 434-4182 at |
| (Name of Contact | |
| Enclosed is a check for the following amount r | nade payable to the Florida Department of State: |
| ■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of \$ | Fee & \$\subseteq\$\$\$ \$\subseteq\$\$\$ \$\subseteq\$\$\$ \$\subseteq\$\$\$ \$\subseteq\$\$\$ \$\subseteq\$\$\$ \$\subseteq\$\$\$ \$\subseteq\$\$\$\$ \$\subseteq\$\$\$\$\$\$ \$\subseteq\$ |
| Mailing Address Amendment Section | Street Address |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

FILED

Health First Health Plans, Inc.

2022 FEB -8 PM 1:40

| Name of Corporation as currently filed with the Florida D | ept. of State) | SECRETARY OF ST TALLAHASSEE.F |
|--|--------------------------------------|------------------------------------|
| N15000000054 | | TALLAHASSEE, I |
| (Document Number | er of Corporation (if known) | |
| Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation: | s, this <i>Florida Not For Profi</i> | t Corporation adopts the following |
| A. If amending name, enter the new name of the corporati | on: | |
| N/A | | The new |
| name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name. | ion" or "incorporated" or th | e abbreviation "Corp." or "Inc." |
| B. Enter new principal office address, if applicable: | N/A | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: | N/A | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| | | |
| D. If amending the registered agent and/or registered offic | e address in Florida, enter t | the name of the |
| new registered agent and/or the new registered office ad | | |
| Name of New Registered Agent: | N/A | |
| | | |
| | (Florida stre | vet address) |
| New Registered Office Address: | | |
| | | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered | Agent: | to at the California and |
| hereby accept the appointment as registered agent. I am fan | nuar with and accept the obli | igations of the position. |
| | | |
| Six | nature of New Registered Ag | ent, 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.

| Example: \underline{X} Change \underline{X} Remove \underline{X} Add | PT John Do V Mike Jo SV Sally Sr | ones | |
|--|--|---|--|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add | <u>D</u> | Robert K. Henry | |
| x Remove | | | |
| 2) Change Add | D | Kim K, Patrick | 6450 US Highway 1 Rockledge, FL 32955 |
| Remove 3) Remove Add Remove | | | |
| 4) Change Add | | | |
| Remove | | | |
| 5) Change Add | | | |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |
| E. If amending or addin (attach additional shee | | cles, enter change(s) here: (Be specific) | |
| N/A | | | |
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| The date of each amendment | (e) adoption | 10/21/2021 | | | | _, if other than the |
| date this document was signed. | (s) adoption. | - | | | | _, it outer man the |
| | | | | | | |
| Effective date if applicable: | 10/01/2021 | | | | | |
| Effective date ii applicable: | | o more than 90 day | | GL L A | | |
| | ŧпс | этоге тап 90 ааў | s wier amenam | ет јие аане) | | |
| Note: If the date inserted in th | is block does - | ext most the englis | abla statutaru S | ling pagginama | حدم اللبيد معماه منطف | ha listad on the |
| document's effective date on the | is block does t | of State's records | aoic statutory II | ang requirements | , uns date will not | oe fisieu as the |
| document s effective date on th | ic izepartinent | or state's records. | | | | |
| Adoption of Amendment(s) | 11 | ግሀርሪቱ ለአመነ | | | | |
| Assoption of Amendment(8) | <u>u</u> | 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.

| lin lana | |
|---|-------|
| Dated TIO JU JU | |
| Signature WWWWWW | |
| (By the chairman or vice chairman of the board, president or other officer-if dire | ctors |
| have not been selected, by an incorporator – if in the hands of a receiver, trusted | |
| other court appointed fiduciary by that fiduciary) | |
| N' L L W D H | |
| Nicholas W. Romanello | |
| (Typed or printed name of person signing) | |
| | |
| A colonia C | |
| Assistant Secretary | |

(Title of person signing)