Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fam Number : (850) 617-6380

From:

Account Name : VCORP SERVICES, LLC

Account Number : 120080000067 Phone : (545)425-0077 Fax Number : (845)818-3580

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one small address please. **

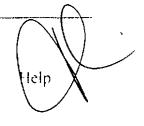
Email Address: fllings@vccrpservices.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN DIXIE COMMUNITY HEALTH, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu



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Articles of Amendment to Articles of Incorporation of

Dixie Community Health, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N23000005946 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp. "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 ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Ta:

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 X Remove X Add	PT John De V Mike Jo SV Sally Si	<u>ones</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
Change Add	<u>P</u>	Ilit Osher	19723 Brickel Point Drive Boca Raton, FL 33498
Remove			
2) Change Add	<u>P</u>	Nicholas Osher	17275 N. Collins Ave. #405 — North Miami, FL 33160
Remove 3) Remove Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
δ) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
			

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The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	···
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will repartment of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s) 1.	

2023-06-28 14:25:01 GMT

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From: Vcorp Services, LLC

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To:

adopted by the board of directors.

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There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

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