N24000004776

Florida Department of State
Division of Corporations
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ADVENTHEALTH PCP NETWORK, INC.

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APR 07 2025
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Articles of Amendment
to
Articles of Incorporation
of

AdventHealth PCP Network, Inc.

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

N24000014776

(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:

AdventHealth Bond Clinic, Inc.

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "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)

14055 Riveredge Dr.,
Ste 250
Tampa, Florida 33637

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

55 Riveredge Dr.,
Ste 250
Tampa, Florida 33637

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:

(City) 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

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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ____ Change x Add	D	David Ottati	14055 Riveredge Dr., Ste 250, Tampa, FL 33637
____ Remove			
2) ____ Change x Add	D	Dina Didenko	14055 Riveredge Dr., Ste 250, Tampa, FL 33637
____ Remove 3) ____ Change x Add	D	Jennifer Wandersleben	14055 Riveredge Dr., Ste 250, Tampa, FL 33637
____ Remove			
4) ____ Change x Add	D	Jennifer Snider	14055 Riveredge Dr., Ste 250, Tampa, FL 33637
____ Remove			
5) ____ Change x Add	AS	Jessica Schuman	14055 Riveredge Dr., Ste 250, Tampa, FL 33637
____ Remove			
6) ____ Change ____ Add	P, D	Bryan Stiltz	900 Hope Way Altamonte Springs, FL 32714
x Remove			

E. **If amending or adding additional Articles, enter change(s) here:**
(attach additional sheets, if necessary) (Be specific)

Continuation of Officers and/or Director amendments:

Remove	D, S	Jessica Baird	900 Hope Way, Altamonte Springs, FL 32714
Remove	D, S	Kelly Pettijohn	900 Hope Way, Altamonte Springs, FL 32714
Remove	D, T	Brent Davis	900 Hope Way, Altamonte Springs, FL 32714
Remove	D,	Robert Rodgers, MD	900 Hope Way, Altamonte Springs, FL 32714

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(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 listed as the document's effective date on the Department of State's records.

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 2-28-2025

Signature Toni L Bernos

(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)

Toni Bernos Toni L. Bernos

(Typed or printed name of person signing)

Assistant Secretary

(Title of person signing)