## N 42700

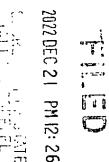
(Requestor's Name)
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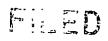
## **COVER LETTER**

TO: Amendment Section Division of Corporations

BAPTIST HEAL NAME OF CORPORATION:	TH SOUTH FLOR	IDA, INC.			
N42700					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are :	submitted for filing.				
Please return all correspondence concerning this n	natter to the following	ng:			
Kyle R. Saxon, Esq.					
	(Name of Cont	act Person)		•	
Saxon & Fink, LLP					
	(Firm/ Con	npany)			- <del>-</del> -
9065 SW 87 Avenue, Suite 112					
	(Addre	ss)		•••	
Miami, Florida 33176					
	(City/ State and	l Zip Code)		<u> </u>	
kylesaxon@saxonfink.com					
E-mail address: (to be	used for future annu	al report no	dification	3)	· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, pla	ease call:				
Kyle R. Saxon		305 at		371-9575	
(Name of Contact Per		(Are:	(Code)	(Daytime Telepho	ne Number)
Enclosed is a check for the following amount mad	le payable to the Flo	orida Depar	iment of !	State:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of Stat		ру	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address Amendment Section		Street A Amenda	ddress ient Secti	on	

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



2022 DEC 21 PM 12: 26

BAPTIST HEALTH SOUTH FLORIDA, INC.	<b>.</b> .	2022 DEC 21 PM 12: 21
(Name of Corporation as currently filed with the F	lorida Dept. of State)	
N42700	,	ALLAN SEE, FL
(Documen	at Number of Corporation (i	f known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of the co	Prporation:	
name must be distinguishable and contain the word "co" Company" or "Co." may not be used in the name.	corporation" or "incorpora	The new led" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	ERESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	(y)	
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	d office address in Florida	a, enter the name of the
Name of New Registered Agent:	uice address:	
New Registered Office Address:	(F	'lorida street address)
		, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I a	ered Agent: m familiar with and accept	the obligations of the position.
	Signature of New Registr	avad Amount if all

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 Do           V         Mike Jo           SV         Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	CEO	Brian E. Keeley	6855 Red Road, Suite 600 Coral Gables, FL 33143
x Remove			
2) Change Add	P/CEO_	Albert L. Boulenger	6855 Red Road, Suite 600 Coral Gables, FL 33143
Remove 3) Change × Add Remove	<u>C</u>	Jay A. Hershoff	6855 Red Road, Suite 600 Coral Gables, FL 33143
4) Change Add	<u>C</u>	James Carr	6855 Red Road, Suite 600 Coral Gables, FL 33143
<ul> <li>X Remove</li> <li>5) Change</li> <li>X Add</li> <li>Remove</li> </ul>	<u>S</u>	Roberta Stokes	6855 Red Road, Suite 600 Coral Gables, FL 33143
6) Change Add	<u>s</u>	Richard H. Dailey	6855 Red Road, Suite 600 Coral Gables, FL 33143
Remove  E. If amending or addin (attach additional shee)		cles, enter change(s) here: (Be specific)	

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.

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Example:  X Change X Remove X Add	PT         John Do           V         Mike Jo           SV         Sally Sr	<u>nes</u>	
Type of Action (Check One)	Title	<u> Матне</u>	Address
I) Change Add	<u>VC</u>	Jay A. Hershoff	6855 Red Road, Suite 600 Coral Gables, FL 33143
x Remove			<u> </u>
2) Change Add	<u>vc</u>	Calvin Babcock	6855 Red Road, Suite 600 Coral Gables, FL 33143
Remove 3 ) Remove Add Remove	<u>T</u>	Roberta Stokes	6855 Red Road, Suite 600 Coral Gables, FL 33143
4) Change	<u>T</u>	I. Jeffrey Pheterson	6855 Red Road, Suite 600 Coral Gables, FL 33143
Remove  5) Change	<u>CFO</u>	Mathew V. Arsenault	6855 Red Road, Suite 600 Coral Gables, FL 33143
6) Change Add	EVP	Joseph T. Natoli	6855 Red Road, Suite 600 Coral Gables, FL 33143
E. If amending or addin (attach additional sheet)		cles, enter change(s) here: (Be specific)	
	<u></u>		

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:

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Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	EVP	Glenn D. Waters	6855 Red Road, Suite 600 Coral Gables, FL 33143
Remove 2) Change Add			6855 Red Road, Suite 600 Coral Gables, FL 33143
Remove 3) Change Add Reтюve			6855 Red Road, Suite 600 Coral Gables, FL 33143
4) Change Add			6855 Red Road, Suite 600 Coral Gables, FL 33143
Remove 5) Change Add Remove			6855 Red Road, Suite 600 Coral Gables, FL 33143
6) Change Add			6855 Red Road, Suite 600 Coral Gables, FL 33143
		nnal Articles, enter change(s) here: essary). (Be specific)	

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	With the second	
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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 do	ate)
	ck does not meet the applicable statutory filing requi	
document's effective date on the De	partment of State's records.	and the second s
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.

	November 3, 2022
Dated	
Signature	Ou the EMI
	(B) the charman or vice charman of the board, president or other officer-if directors take not been selected, by an incorporator – if in the hands of a receiver, trustee, or
	officer court appointed fiduciary by that fiduciary)
	Monthly States of the second o
	Jay A. Hershoff