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R. WHITE
DEC 18 2017



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PROVIDENCE ME	EDICAL CENTER INC.
DOCUMENT NUMBER: P01000023601	
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this mat	ter to the following:
	FRANCISCO D. GUERRA
	Name of Contact Person
PROVID	ENCE MEDICAL CENTER INC.
	Firm/ Company
1	1521 SW 153RD AVENUE
	Address
	MIAMI, FL 33196
	City/ State and Zip Code
ROC	GUMAX@BELLSOUTH.NET
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, please	e call:
FRANCISCO D GUERRA	at ()220-8006
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 & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

17 DEC 14 PM 2: 24

PROVIDENCE MEDICAL CENTER INC.

P0100002	y filed with the Florida Dept. of State)
POTURARIZ	
	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a lits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation: N/A	
name must be distinguishable and contain the word "corporation" Corp., ""Inc.," or Co., " or the designation "Corp.," "Inc.," or "(word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
(11th ciput Office undress <u>brost be A STREET ADDRESS</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 office addr	
new registered agent and/or the new registered office address:	<u>:</u>
Name of New Registered Agent N/A	
(Florida stre	zet address)
New Registered Office Address: N/A	, Florida

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	<u>PT</u> Jo	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	VP	FRANCISCO GUERRA	11521 SW 153RD AVENUE
Add			MIAMI, FL 33196
Remove			
2) Change	LVSD	PATRICIA GUERRA	11521 SW 153RD AVENUE
Add			MIAMI, FL 33196
X Remove			
3) Change	P	FRANCISCO X. QUINTANA	11311 SW 82ND. TERRACE
X Add		-	MIAMI, FL 33183
Remove			
4) Change			
Add			-
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	
N/A	
<u> </u>	
<u> </u>	
	
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provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
MR. FRANCISCO X. QUINTANA OWN :	51% OF THE TOTAL ISSUED SHARES OF THE CORPORATION AND
MR, FRANCISCO D. GUERRA OWN TH	E 49% OF THE TOTAL ISSUED CHARES OF THE CORPORATION
<u></u>	

	12/05/2017	
The date of each amendment(s) and date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date with partment of State's records.	II not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
DECEMBI Dated Signature	RE 5TH. 2017	
(By a d selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	FRANCISCO GUERRA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	