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## COR AMND/RESTATE/CORRECT OR O/D RESIGN CAPITAL HEALTHCARE, INC.

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## Articles of Amendment to Articles of Incorporation

of CAPITAL HEALTHCARE, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P02000108497 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida 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," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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: New Registered Office Address: (Florida street address) , Florida (City) (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.

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Signature of New Registered Agent, if changing

## H130002058133

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)

Title	<u>Name</u>	Address	Type of Action
<u>VP</u>	Robert L. Klusman	249 N MAITLAND AVE SUITE 200 ALTAMONTE SPGS, FL 32701	☑ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
E. If amend	ding or adding additional Articles, and additional sheets, if necessary). (Be	enter change(s) here: specific)	
provisio	nendment provides for an exchange ons for implementing the amendme of applicable, indicate N/A)	e, reclassification, or cancellation of issuant if not contained in the amendment if	ued shares, self:
		·	

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The date of each amendmen	t(s) adoption: SEPTEMBER 12, 2013
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more man 20 days after americanem file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s
	are approved by the shareholders through voting groups. The following statement of for 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	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
<u></u>	(vating group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_SEP	TEMBER <u>/6</u> , 2012
Signature	X
(By	A director, president or other officer - if directors or officers have not been cted, by an incorporator - if in the hands of a receiver, trustee, or other court
appe	ointed fiduciary by that fiduciary)
	JOHN W. SLAVENS
	(Typed or printed name of person signing)
	Director
	(Title of person signing)