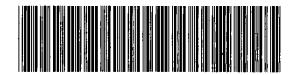
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08 OCT 20 PH 2: 41
SECRETARY OF STATE
TALLAHASSEE, FLORID

C.COULLIETTE OCT 2 2 2008

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MCJ	Medical Center (Corp.
DOCUMENT NUMBER: PO4000	009656	
The enclosed Articles of Amendment and fee ar	re submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Igmar Ch	ang f Contact Person)	
MCJ Medical Cent	er Corp n/Company)	
3900 NW 79 Ave,	Suite 511 Address)	
Doral, FL 33166 (City/Sta	ate and Zip Code)	
For further information concerning this matter,	please call:	
Igmar Chang (Name of Contact Person)	at (<u>305</u>) <u>641-0</u> (Area Code & Daytime Tele	94/ phone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida Departn	nent of State:
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 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 of

08 OCT 20 PH 2: 41
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

MCJ Medical Center Corp.

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

P04000009656

(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:

The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co. "Co". A professional corporation name must contain association," or the abbreviation "P.A."	," or the designation "Corp," "Inc," or
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	3900 NW 79 Ave, Ste 511 Doral, FL 33166
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3900 NW 79 Ave, Ste 511 Doral, FL 33166
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office administration. Name of New Registered Agent:	dress:

New Registered Office Address:

(Florida street address)

Dora (City), Florida 33166

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

		tors, enter the title and name of each	
	nd title, name, and address litional sheets, if necessary)	of each Officer and/or Director being	g added:
<u>Title</u>	<u>Name</u>	Address	Type of Action
	<u></u>		Add Remove
	 		Add Remove
			Add Remove
	ding or adding additional Additional Additional sheets, if necessary	Articles, enter change(s) here: (Be specific)	
Office	er Director:	Igmar Chang (Pre: 3900 NW 79 P	esident)
Chan	ge Address to	: 3900 NW 79 /	Ne, Ste 511
4	ل	Doral, FL 331	66
		•	
provisi		exchange, reclassification, or cancella mendment if not contained in the am	
	A A STATE OF THE S		

Page 2 of 3

·Th	e date of each amendment(s) adoption: 09 01 2008
Eff	fective date if applicable: 09/01/2008 (no more than 90 days after amendment file date)
Ad	option of Amendment(s) (CHECK ONE)
\(\sqrt{1} \)	The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
	The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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
	(voting group)
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
	Dated
	Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	<u>Igmar Chang</u> (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)