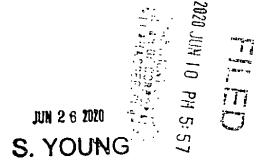
## P06000 155325

Office Use Only



300345287343

06/10/20--01011 --015 \*\*35.00



TO: Amendment Section

## **COVER LETTER**

Division of Corp	orations				
NAME OF CORPO	RATION: 21st Century Onco	ology Management Services	s, Inc.		
	BER:				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Sarah Jackson				
		Name of Contact Person	1		
	GenesisCare USA, Inc.				
	Firm/ Company				
	2270 Colonial Boulevard				
	Address				
	Fort Myers, FL 33907				
	City/ State and Zip Code				
	sarah.jackson@21co.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
Sarah Jackson		at ( 239	de & Daytime Telephone Number		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check to	r the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	☐\$43.75 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

## Articles of Amendment to Articles of Incorporation of

21st Century Oncology Management Services, Inc.	
(Name of Corporation as cu	urrently filed with the Florida Dept. of State)
P06000155325	
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	ion:
GenesisCare USA Management Services, Inc.	The new
name must be distinguishable and contain the word "corporation" for Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Corp.," Lo". A professional corporation name must contain the word
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )	)
	2020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office ac	
Name of New Registered Agent	
(Flo	rida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent.—I am fan	nthar with and accept the obligations of the position.
Signature of a	New Registered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	$\underline{\mathbf{y}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
· · · · · ·	
	<del>-</del>
f an amendment provides for an each	hange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<u> </u>

The date of each a date this document			, if other than the
Effective date <u>if ar</u>	pplic <u>abl</u>	2:	lays after amendment file date)
		(no more man 90 c	idys after amenament file date)
Note: If the date i document's effective	nserted ve date o	in this block does not meet the applicat in the Department of State's records.	ole statutory filing requirements, this date will not be listed as the
Adoption of Amen	idment(	s) ( <u>CHECK ONE</u> )	
☐ The amendments action was not re		vere adopted by the incorporators, or bo	ard of directors without shareholder action and shareholder
		were adopted by the shareholders. The nowere sufficient for approval.	umber of votes cast for the amendment(s)
		vere approved by the shareholders throu ided for each voting group entitled to vo	gh voting groups. The following statement te separately on the amendment(s):
"The numb	ber of vo	tes cast for the amendment(s) was/were	sufficient for approval
hv			•
0,5		(voting group)	<del></del> ,
D	ated	6/5/2020	
S	ignature	Blake Howard	
		(By a director, president or other officer	- if directors or officers have not been ands of a receiver, trustee, or other court
		Blake Howard	
		(Typed or printed na	ne of person signing)
		Treasurer	
		(Title of person signi	ng)