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SELNEDARY OF STATE
TALL AHASSEES TERRIDA

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	RATION: People's Medical C	Centers - Primary Care Inc.,	
DOCUMENT NUM	P10000072564		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Valerie Corbitt		
		Name of Contact Person	1
	People's Medical Centers - Pr	rimary Care Inc.	
		Firm/ Company	
	4114 Sunbeam Rd. Bldg. 100). Suite 102,	
		Address	
	Jacksonville, FL. 32257		
		City/ State and Zip Cod	e
veorb	nitt@phymedcenter.com		
		sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Valerie Corbitt		at (292-2285x
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	urtment of State:
S35 Filing Fee	□\$43.75 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		Amend Division Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

People's Medical Centers - Primary Care Inc.

<u>ly filed with the Florida I</u>	Dept. of State)	
of Corporation (if known)	.	
Florida Profit Corporation	on adopts the following	amendment(
		The new
on," "company," or "inc "Co". A professional cor "P.A."	corporated" or the ab	breviation
N/A		
	<u> </u>	
	— ' _ '	
NT/A		<u> </u>
IN/A	<u> </u>	
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<u>ress in Florida, enter the</u> s:	name of	
_		
reet address)		
reet address)	. Florida	
	of Corporation (if known) Florida Profit Corporation on, " "company," or "incompany," or "in	of Corporation (if known) Florida Profit Corporation adopts the following on," "company," or "incorporated" or the ab "Co". A professional corporation name must co "P.A." N/A N/A Profit Corporation adopts the following on," "company," or "incorporated" or the ab "Co". A professional corporation name must co "P.A." N/A N/A Profit Corporation adopts the following on," "company," or "incorporated" or the ab "Co". A professional corporation name must co "P.A." N/A N/A Profit Corporation adopts the following on," "company," or "incorporated" or the ab "Co". A professional corporation name must co "P.A." N/A N/A Profit Corporation adopts the following N/A Profit Corporation adopts the following N/A N/A Profit Corporation adopts the following N/A N/A Profit Corporation name must co "P.A." N/A

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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	D/P	Victoria M. Critzer	4114 Sunbeam Rd.
Add			Bldg. 100, Suite 102
X Remove			Jacksonville, FL. 32257 2
2) Change	D/P	Joseph Thomas	
X Add			Bldg. 100, Suite 102
Remove			Jacksonville, FL. 32257
3) Change			
Add			
Remove			
4) Change			·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
N/A			
	-		
	<u> </u>		
	 		
			
	Z X		
	7,0	- 2	
	- 56	ADM	~
	633	N	
		AM 11: 32	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	37	☵	`
provisions for implementing the amendment if not contained in the amendment itself:		32	
N/A			

The date of each amendment(s) addate this document was signed.	loption:	, if other than th
Effective date <u>if applicable:</u>		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	I 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	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved 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)	19 1
☐ The amendment(s) was/were add action was not required.	(voting group) pted by the board of directors without shareholder action and shareholder speed by the incorporators without shareholder action and shareholder speed by the incorporators without shareholder action and shareholder speed spee	F L
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	ED AHIII: 32
October 18	3, 2019	: :::
Dated Signature	Jon Jethone	. •
(By a d	ector, 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 (cd fiduciary)	_
	Joseph Thomas	
	(Typed or printed name of person signing)	
	Director/President	
	(Title of person signing)	