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Division of Corporations

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN LA FAMILIA MEDICAL CENTER INC

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Corporate Filing Menu



Articles of Amendment to Articles of Incorporation of

	filed with the Florida Dept. of State)			
216000025007				
(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ articles of Incorporation:	lorida Profit Corporation adopts the fo	llowing am	ndmer	nt(s
A. If amending name, enter the new name of the corporation:				
			nen	
ame must be distinguishable and contain the word "corporation," "co line" or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbr professional corporation name must	eviation "C contain the	orp.," word	
3. Enter new principal office address, if applicable:				
Principal office address MUST BE A STREET ADDRESS )				
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			F ~ 5	
maning address into some control by			=	
		······································	<del></del> ;	
		·	( , ) <del>( , )</del>	
). If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the	(S) 1	ج	
new registered agent and/or the new registered office address:		Play	:01 HIV	
Name of New Registered Agent			27	
			w	
(Florida stre	et caklevss)			
	, Florida	(Zip Code)		
New Registered Office Address:	Ciny			

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)

To: 18506176380

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 = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officeridirector 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>	John Doe	
X Remove	$\underline{\underline{V}}$	Mike Jones	
$X \wedge Add$	<u>sv</u>	Salty Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VΡ	LEONARDO OLIVA	1891 WEST FLAGLER ST
XX Add			MIAMI, FL 33175
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change	<del></del>	-	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		varies as a communicate refer to the event of reference to a variety of the communicate reference to a variety of the communicate reference to a variety of the communicate reference to the communicate reference reference to the communicate reference to the communicate reference referenc	
Add			was to be an in the second of
Remove			

13053284774 Page: 5 of 6 2021-02-22 18:01:01 GMT From: Yanet Avila To: 18506176380 E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

From: Yanet Avila

2/19/2021	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
Effective date if applicable:  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will nedocument's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	sareholder
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	
by	
2/19/2021 Dated	
Signature /s/ Norma Bustamante	
(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)	
NORMA BUSTAMANTE	
(Typed or printed name of person signing)	•
P	
(Title of person signing)	