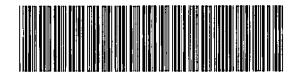
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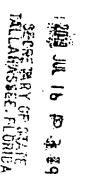
| (Re                     | questor's Name)      |        |
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| PICK-UP                 | ☐ WAIT               | MAIL   |
| (Bu                     | siness Entity Name)  |        |
| (Do                     | ocument Number)      |        |
| Certified Copies        | _ Certificates of    | Status |
| Special Instructions to | Filing Officer:      |        |
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Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations Carechoice Medical NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Address City/ State and Zip Code For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) 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

| Carechoice   | Medica  | al             | Inc                                 | FIL                                    | ED                      |
|--|---|----------------|-------------------------------------|--|-------------------------|
| (Name of (   | Corporation as current                          | dy filed wi    | th the Florida Dej                  | pt. of State)                          |                         |
| <u> </u>   | 011265  |                |                                     | 新 TH 11                                | P                       |
| Pursuant to the provisions of section 607.100  | (Document Number of Ob., Florida Statutes, this | •              | •                                   | SECRE MR)                              | OF STATE                |
| its Articles of Incorporation:   |   |                |                                     |  |                         |
| A. If amending name, enter the new name  | of the corporation:                             |                |                                     |  |                         |
|  |   |                |                                     |  | The new                 |
| name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association  | on "Corp," "Inc," or                            | "Co". A p      | pany," or "incorporofessional corpo | porated" or the at ration name must be | threviation contain the |
| B. Enter new principal office address, if a (Principal office address MUST BE A STR  |   | Po<br>33       | mpano<br>Ole 9                      | Beach,                                 | FL —                    |
| C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF  | <u>ple:</u><br>FICE BOX                         | 15<br>Po<br>33 | ngano                               | 12th An<br>Beach                       | e#203                   |
| D. If amending the registered agent and/or new registered agent and/or the new registered agent agen |   |                | orid <u>a, enter the na</u>         | ime of the                             |                         |
| Name of New Registered Agent   |   |                |                                     | · <del></del>                          |                         |
| _  | (Florida st                                     | reet address   | <u> </u>                            |  |                         |
| N. Barran J. Office (11)   | ļ   |                | ,                                   | Election                               |                         |
| New Registered Office Address:   | <del></del>                                     | (City)         |                                     | _, Florida<br>(Zip (                   | Code)                   |
| New Registered Agent's Signature, if char<br>I hereby accept the appointment as registere  |   |                | ccept the obligation                | ns of the position.                    |                         |
|  | Signature of New I                              | Registered     | Agent, if changing                  |  |                         |

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             | PT        | John Do       | <u>oc</u>   |                 |
|-------------------------------|-----------|---------------|-------------|-----------------|
| X Remove                      | Y         | Mike Jo       | ones        |                 |
| X Add                         | <u>sv</u> | Sally Sr      | <u>nith</u> |                 |
| Type of Action<br>(Check One) | Title     |               | Name        | <u>Addres</u> s |
| 1) Change                     |           | _             |             |                 |
| Add                           |           |               |             |                 |
| Remove                        |           |               |             |                 |
| 2) Change                     |           |               |             |                 |
| Add                           |           |               |             |                 |
| Remove                        |           |               |             |                 |
| 3 ) Change                    |           | - <del></del> |             |                 |
| Add                           |           |               |             |                 |
| Remove                        |           |               |             |                 |
| 4) Change                     |           | _             |             |                 |
| Add                           |           |               |             |                 |
| Remove                        |           |               |             |                 |
| 5) Change                     |           | <b></b>       |             |                 |
| Add                           |           |               |             |                 |
| Remove                        |           |               |             |                 |
| 6) Change                     |           | <del></del>   |             |                 |
| Add                           |           |               |             |                 |
| Remove                        |           |               |             |                 |

| ttach additional sheets, if necessary).  | icles, enter change(s) here: (Be specific)   |
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| an amendment provides for an exch  | hange, reclassification, or cancellation of issued shares,   |
| rovisions for implementing the ame   | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| an amendment provides for an exch<br>rovisions for implementing the ame<br>(if not applicable, indicate N/A) | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| rovisions for implementing the ame   | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
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| rovisions for implementing the ame   | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame  | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |

| The date of each amendment(s) adoption:  | , if other than the           |
|--|-------------------------------|
| date this document was signed.   |                               |
| 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 dedocument's effective date on the Department of State's records.                                    | ate will not be listed as the |
| Adoption of Amendment(s) ( <u>CHECK ONE</u> )  |                               |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment( by the shareholders was/were sufficient for approval.   | s)                            |
| The amendment(s) was/were approved by the shareholders through voting groups. The following statements to be separately provided for each voting group entitled to vote separately on the amendment(s):        | ent                           |
| "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 shareholde action was not required.   | er                            |
| 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 courappointed fiduciary by that fiduciary) |                               |
| (Typed of printed name of person ligning)  |                               |
| President (Title of person signing)  |                               |