## 99300085634

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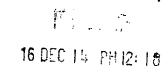
**TO:** Amendment Section Division of Corporations

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NAME OF CORPORATION: Baptist Occupational Health, Inc.					
DOCUMENT NUMBER: P93000085634					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corre	espondence concerning this mat	ter to the following:			
	Missy Poston				
		Name of Contact Person			
	Baptist Health System, Inc.	Traine of Contact 1 pigot	•		
		Firm/ Company			
	Firm/ Company 841 Prudential Drive, Suite 1802				
		Address			
	Jacksonville, Florida 32207				
		City/ State and Zip Cod	e		
	•				
miss	y.poston@bmcjax.com				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	on concerning this matter, pleas	e call:			
Missy Poston		at (904	de & Daytime Telephone Number		
Name	of Contact Person	Area Co	de & 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 & Certificate of Status	A3.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle		

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Baptist Occupational Health, Inc.	- 報告: *** *** ** ** ** ** ** ** ** ** ** **
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P93000085634	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
Baptist Health Clinic, Inc.	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	3563 Philips Highway
(Principal office address MUST BE A STREET ADDRESS)	Bldg. A, Suite 101
	Jacksonville, Florida 32207
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office addres	<u>s:</u>
Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	, Florida, City) (Zip Code,
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.

<u>X</u> Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	VP	Marsha Donaldson	3563 Philips Highway	
X Add			Bldg. A, Suite 101	
Remove			Jacksonville, Florida 32207	
2) Change	VP	Catherine Graham	3563 Philips Highway	
X Add			Bldg. A, Suite 106	
Remove			Jacksonville, Florida 32207	
3) Change				
Add				
_ Remove			<del></del> -	
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(y not applicable, indicate N/A)	
(y noi applicable, indicale N/A)	
(y noi applicable, indicale N/A)	
(y not applicable, indicale N/A)	
(ij noi applicable, indicale N/A)	

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 document's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ 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 statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	ler
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12/2/16	
Signature Q. Hush Green	
(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 co- appointed fiduciary by that fiduciary)	111
A. Hugh Greene (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	