

Document Number Only

P940000088681

CT Corporation System

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 (850)222-1092  
City State Zip Phone

CORPORATION(S) NAME

000003026250-5  
-10/27/99--01049--009  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

W99000024828

Name

Pain Management Center of Tampa, Inc

Change new TD: Tenet PMC, Inc

99 OCT 27 PM 5:00  
FILED  
TALLAHASSEE, FLORIDA

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Profit              | <input checked="" type="checkbox"/> Amendment   | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> NonProfit           | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
| <input type="checkbox"/> Foreign             | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> LLC                 | <input type="checkbox"/> Reservation            | <input type="checkbox"/> Change of A.       |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Reinstatement       | <input type="checkbox"/> Call When Ready        | <input type="checkbox"/> After              |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Call if Problem        | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Will Wait              |   |
| <input checked="" type="checkbox"/> Walk In  |   |   |
| <input type="checkbox"/> Mail Out            |   |   |

99 OCT 27 AM 11:33  
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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Name	10/28/99
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Jeffrey Butterfield

\*00789, 00542, 00672



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

October 27, 1999

CT Corporation System  
660 East Jefferson St.  
Tallahassee, FL 32301

*check - yn  
pick up*

SUBJECT: PAIN MANAGEMENT CENTER OF TAMPA, INC.  
Ref. Number: P94000088681

We have received your document for PAIN MANAGEMENT CENTER OF TAMPA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The amendment must be signed by an incorporator if adopted by the incorporators or by a director if adopted by the directors.

If you have any questions concerning the filing of your document, please call (850) 487-6907.

*ASN*  
Annette Ramsey  
Corporate Specialist

Letter Number: 599A00051732

*Please  
Back Date  
marks*

RECEIVED  
99 OCT 29 PM 2:07  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF**

**FILED**  
**99 OCT 27 PM 5:00**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pain Management Center of Tampa, Inc.  
(present name)

*Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:*

**FIRST:** Amendment(s) adopted: *(indicate article number(s) being amended, added or deleted)*

Article I.

The name of the corporation is Tenet PMC, Inc.

**SECOND:** 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, are as follows:

**THIRD:** The date of each amendment's adoption: October 20, 1999

**FOURTH:** Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) 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 \_\_\_\_\_,"  
voting group

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 20th day of October, 19 99

Signature \_\_\_\_\_

(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

Richard B. Silver  
Typed or printed name

Vice President - Director  
Title