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December 8, 2000

Secretary of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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-12/12/00--01064--009
*****43.75 *****43.75

Re: Mid-Florida Cardiovascular Anesthesia Associates, P.A.

Dear Sir or Madam:

Enclosed please find original and one copy of Articles of Amendment to the Articles of Incorporation of Mid-Florida Cardiovascular Anesthesia Associates, P.A. and our check made payable to "Florida Department of State" in the amount of \$43.75 representing filing fee (\$35.00), and one certified copy (\$8.75).

If you find these items to be in proper order, I would appreciate your returning the enclosed copy to me as a certified copy as soon as possible after the original is filed.

Yours truly,

Beverly A. Morris

Beverly A. Morris

BAM:dsb

Enclosures: Amended Articles of Incorporation
Check \$43.75

cc: Vincent C. Palmire, Jr., M.D.
Paul G. Robertie, M.D.
Daniel B. Sullivan, D.O.

*Debbie gave
author to correct
name in heading
12-15-00 ac*

FILED
00 DEC 12 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*x/c ac
12/15/00*

ARTICLES OF AMENDMENT
TO THE ARTICLES OF INCORPORATION
OF

MID FLORIDA CARDIOVASCULAR ANESTHESIA ASSOCIATES, *INC.*

Pursuant to the provisions of Section 607.1003 and 607.1006 of the Florida General Corporations Act, the undersigned corporation adopts the following Articles of Amendment.

1. The name of the corporation is MID FLORIDA CARDIOVASCULAR ANESTHESIA ASSOCIATES, P.A.

2. This amendment was adopted by the shareholders of the corporation on October 18, 2000, in the manner prescribed by the Florida General Corporation Act:

The name of the corporation is MID FLORIDA CARDIOVASCULAR ANESTHESIA ASSOCIATES, P.A. Its correct name and purpose are reflected on its Articles of Incorporation, and the name was changed by typographical error in paragraph 1 of the Articles of Amendment filed October 2, 2000.

Dated October 18, 2000.

MID FLORIDA CARDIOVASCULAR
ANESTHESIA ASSOCIATES, P.A.

By: _____

Paul G. Robertie, M.D.

By: _____

Vincent C. Palmire, Jr., M.D.

By: _____

Daniel B. Sullivan, M.D.

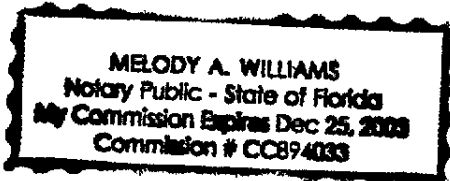
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

COUNTY OF MARION

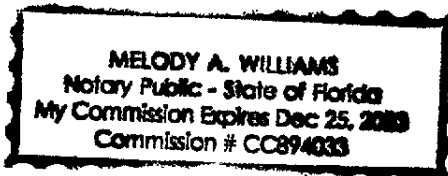
The foregoing instrument was acknowledged before me this 18 day of October, 2000, by Paul G. Robertie, M.D., who is personally known by me or who has produced _____ as identification.



Melody A. Williams
Notary Public
Typed Name: MELODY A WILLIAMS
Commission Expires: 12-25-2003
Commission No.: CC 894033

STATE OF FLORIDA
COUNTY OF MARION

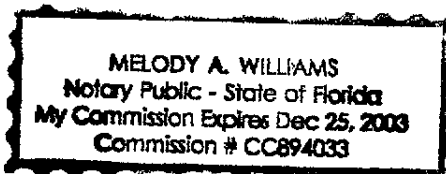
The foregoing instrument was acknowledged before me this 18 day of October, 2000, by Vincent C. Palmire, Jr., M.D., who is personally known by me or who has produced _____ as identification.



Melody A. Williams
Notary Public
Typed Name: MELODY A WILLIAMS
Commission Expires: 12-25-2003
Commission No.: CC 894033

STATE OF FLORIDA
COUNTY OF MARION

The foregoing instrument was acknowledged before me this 18 day of October, 2000, by Daniel B. Sullivan, M.D., who is personally known by me or who has produced DO as identification.



Melody A. Williams
Notary Public
Typed Name: MELODY A WILLIAMS
Commission Expires: 12-25-2003
Commission No.: CC 894033