

DOMESTIC
NONPROFIT CORPORATION

STATE OF MAINE

ARTICLES OF AMENDMENT

Central Maine Medical Center College of
Nursing and Health Professions

(Name of Corporation)

File No. 19770032ND Pages 3
Fee Paid \$ 10
DCN 2141121700030 LNME
FILED
04/22/2014

Julia R. Flynn
Deputy Secretary of State

A True Copy When Attested By Signature

Julia R. Flynn
Deputy Secretary of State

Pursuant to 13-B MRSA §§802 and 803, the undersigned corporation executes and delivers the following Articles of Amendment:

FIRST: ("X" one box only.) public benefit corporation mutual benefit corporation

SECOND: Describe NATURE OF CHANGE (i.e. change in name of corporation, purpose, number of directors, adding or deleting section or revision of section, etc.) as well as TEXT of amendment. Attach additional pages as needed.

Change in name of corporation: Effective July 1, 2014, the Corporation changes its name to
Maine College of Health Professions and ceases use of the name of Central Maine Medical
Center College of Nursing and Health Professions.

THIRD: ("X" one box only.) The amendment was adopted on (date) December 16, 2013 as follows:

- By the ^{sole} members at a meeting at which a quorum was present and the amendment received at least a majority of the votes which members were entitled to cast.
- (If the Articles require more than a majority vote.) By the members at a meeting at which the amendment received at least the percentage of votes required by the Articles of Incorporation.
- By the written consent of all members entitled to vote with respect thereto.
- (If no members, or none entitled to vote thereon.) By majority vote of the board of directors.

FOURTH: The address of the registered office of the corporation in the State of Maine is _____
300 Main Street, Lewiston, Maine 04240
(street, city, state and zip code)

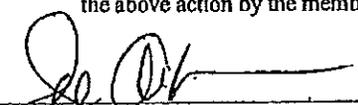
DATED March __, 2014

*By 
(signature)

Samantha A. Luce, Secretary
(type or print name and capacity)

*By _____
(signature)

(type or print name and capacity)

<p>MUST BE COMPLETED FOR VOTE OF MEMBERS</p> <p>I certify that I have custody of the minutes showing the above action by the members.</p> <p><u></u> (signature of clerk, secretary or asst. secretary)</p>

*This document **MUST** be signed by any duly authorized officer. (13-B MRSA §104.1.B)

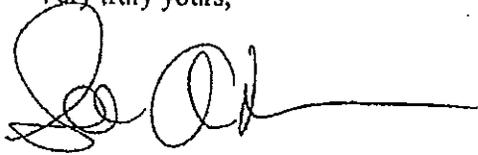
Please remit your payment made payable to the Maine Secretary of State.

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101
FORM NO. MNPCA-9 (2 of 2) Rev. 9/16/2005 TEL. (207) 624-7752**

Re: Central Maine Medical Center College of Nursing and Health Professions | Dating of Articles of Amendment

This letter will verify and confirm that, in my capacity as secretary of Central Maine Medical Center College of Nursing and Health Professions, I executed the undated Articles of Amendment (Form no. MNPCA-9) on March 20, 2014. The date on these Articles of Amendment, to the left of my signature on page 2, should read: March 20, 2014.

Very truly yours,

A handwritten signature in black ink, appearing to read 'S. Luce', followed by a long horizontal line extending to the right.

Samantha A. Luce
Secretary, Central Maine Medical Center College of Nursing and Health Professions