# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: YASMEEN M FERNANDEZ

SECRETARY

City-State-Zip: MIAMI FL 33182

04/28/2015

Electronic Signature of Signing Officer/Director Detail

| Officer/Director Detail : |                       |                 |                     |
|---------------------------|-----------------------|-----------------|---------------------|
| Title                     | SECRETARY             | Title           | DIRECTOR            |
| Name                      | FERNANDEZ, YASMEEN M  | Name            | FERNANDEZ, DAVID J. |
| Address                   | 1193 NW 133 CT        | Address         | 1193 NW 133 CT      |
| City-State-Zip:           | MIAMI FL 33182        | City-State-Zip: | MIAMI FL 33182      |
|                           |                       |                 |                     |
| Title                     | DIRECTOR              | Title           | Р                   |
| Name                      | SOTOLONGO, JOSEFINA   | Name            | LEYVA, ARMANDO A    |
| Address                   | 782 NW 42 AVE STE 641 | Address         | 6200 SHENANDOAH WAY |
| City-State-Zip:           | MIAMI FL 33126        | City-State-Zip: | ORLANDO FL 32807    |
|                           |                       |                 |                     |
| Title                     | VP                    | Title           | DIRECTOR            |
| Name                      | MIR, ASIF M           | Name            | MIR, ARMANDA P      |
| Address                   | 1182 NW 133 CT        | Address         | 1182 NW 133 CT      |

# Name and Address of Current Registered Agent:

GARCIA, FELIX A 3109 NORTH WEST 133RD STREET OPA-LOCKA, FL 33054 US

SIGNATURE: YESIT J CAMPO

City-State-Zip: MIAMI FL 33182

# FEI Number: 80-0793504

**Current Mailing Address:** 

## REPORT DOCUMENT# N1200003843

2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

Entity Name: U.S. PUBLIC RURAL HEALTH SERVICES, CORP.

# **Current Principal Place of Business:**

17501 NORTH WEST 47TH COURT MIAMI GARDENS. FL 33055

3109 NORTH WEST 133RD STREET OPA-LOCKA, FL 33054

Electronic Signature of Registered Agent

# Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Date

FILED Apr 28, 2015 Secretary of State CC6725311436

> 04/28/2015 Date