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DAVID R. WEISSMAN
ATTORNEY AT LAW
SUITE 508 DADELAND TOWERS
9200 SOUTH DADELAND BOULEVARD
MIAMI, FLORIDA 33156

TELEPHONE (305) 670-0987
TELEFAX (305) 670-1450

June 16, 1998

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*****87.50 *****87.50

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: New Riviera Health Resort, Inc.: Amendment to Articles of
Incorporation changing name
Victoria Health & Rehabilitation Center, Inc.:
Application for Registration of the Fictitious Name
of New Riviera Health Resort

Gentlemen:

Please be advised that I represent New Riviera Health Resort,
Inc. who desires to amend its Articles of Incorporation to change
its name to South Miami Convalescent Center, Inc. In connection
therewith, I am enclosing the following:

1. Original Articles of Amendment to Article of
Incorporation of New Riviera Health Resort, Inc.
2. Check payable to your order in the amount of \$87.50
representing \$35.00 filing fee and \$52.50 for certified
copy.

After the name has been changed, please file the enclosed
Application for Registration of the Fictitious Name of New
Riviera Health Resort by Victoria Health & Rehabilitation Center,
Inc. In connection therewith, I am enclosing the following:

1. Application for Registration of Fictitious Name filed
by Victoria Health & Rehabilitation Center, Inc.
2. Stacey Health Care Centers, Inc. Check No. 18482 pay-
able to your order in the amount of \$90.00 for
Application for Registration of the Fictitious Name for
New Riviera Health Resort.

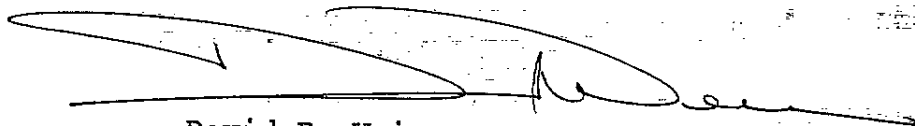
Please return the certified copy of the Amendment to the Articles
of Incorporation of New Riviera Health Resort, Inc. and the
Fictitious Name approval to the undersigned. You may deliver

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these items to Empire Corporate Kit who is filing same on my behalf as my Agent.

Very truly yours,

A handwritten signature in dark ink, appearing to read 'David R. Weissman', with a long horizontal stroke extending to the right.

David R. Weissman

DRW/mf

Enclosures

cc: Michael E. St. Clair
Sharon S. Pollock
Kenneth Handmaker, Esq.
Ralph L. Stacey, Jr.

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Charter Number Only

6/17/98

Requestor's Name
David R. Weissman
Address
9200 S. Dadeland Blvd. #508
Miami, FL 33156
City State ZIP Phone

VALIDATION ONLY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CORPORATION(S) NAME

New Riviera Health Resort, Inc.

name

Change

Amend

- () Profit
() NonProfit
() Foreign
() Limited Partnership
() Reinstatement
☒ Certified Copy
() Call When Ready
☒ Walk In
- ☒ Amendment
() Dissolution
() Annual Report
() Reservation
() Photo Copies
() Call If Problem
☒ Pick Up
- () Merger
() Mark
() Other
() Change of Registered Agent
() Certificate Under Seal
() After 4:30
() Mail Out
- () Will Wait

Name	6/18/98
Availability	
Document	POW
Examiner	
Updater	POW
Verifier	POW
Acknowledgment	POW
W.P. Verifier	POW

Certified Copy



Empire Toll Free: 1-800-432-3028

**ARTICLES OF AMENDMENT
TO ARTICLES OF INCORPORATION OF
NEW RIVIERA HEALTH RESORT, INC.**

1. ARTICLE I of the Articles of Incorporation of **NEW RIVIERA HEALTH RESORT, INC.** is amended to read as follows:

ARTICLE I

The name of this corporation shall be: **SOUTH MIAMI
CONVALESCENT CENTER, INC.**

2. The foregoing Amendment was adopted by a majority vote of the Shareholders and Directors of **NEW RIVIERA HEALTH RESORT, INC.** on June 15, 1998.

IN WITNESS WHEREOF, the undersigned President and Treasurer of this corporation have executed these Articles of Amendment on June 15, 1998.




MICHAEL E. ST. CLAIR, President


SHARON S. POLLOCK, Treasurer

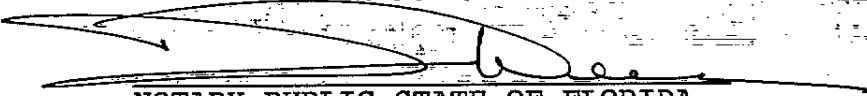
STATE OF FLORIDA)
)
COUNTY OF MIAMI-DADE)

Before me the undersigned authority personally appeared **MICHAEL E. ST. CLAIR** and **SHARON S. POLLOCK** who are personally known to me and known to me to be the individuals described in and who executed the foregoing instrument as President and Treasurer respectively of **NEW RIVIERA HEALTH RESORT, INC.** and they severally acknowledged to and before me that they executed

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such instrument as the free act and deed of said corporation for the purposes therein expressed and that the seal affixed to the foregoing instrument is the corporate seal of said corporation all under authority in them, duly vested by the Board of Directors and Shareholders of said corporation.

WITNESS my hand and official seal at Miami, County of Dade, State of Florida this 15th day of June, 1998.


NOTARY PUBLIC STATE OF FLORIDA
AT LARGE

David R. Weissman
Notary's Printed Name

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