

B 93000000166

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MEMBER OF THE STATE BAR OF CALIFORNIA

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U.S.A.

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March 4, 1998.

Attn: Florida Department of State.

Division of Corporations
409 E. Gaines Street
Tallahassee,
FL 32399

Dear Sir/Madam,

Re: FLORIDA SUNSHINE HEALTH CARE LIMITED PARTNERSHIP.

We return for your kind attention and action the Annual Report on the proper form, and the Certificate of Amendment with the name and address of the new general partner together with a check in the amount of \$208.75 in payment of fees.

Yours sincerely,

Camille Michael

Camille Michael, Secretary
to Peter Double

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Name Availability	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

February 19, 1998

FLORIDA SUNSHINE HEALTH CARE LIMITED PARTNERSHIP
322 VISTA DEL MAR
REDONO BEACH, CA 90277

SUBJECT: FLORIDA SUNSHINE HEALTH CARE LIMITED PARTNERSHIP
Ref. Number: B93000000166

We have received your document for FLORIDA SUNSHINE HEALTH CARE LIMITED PARTNERSHIP and your check(s) totaling \$208.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The enclosed annual report or reinstatement must be filed and the appropriate fee submitted before your document can be filed.

The name and address is required for any newly designated general partner.

There are two document and one check.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Kenny Manning
Corporate Specialist

Letter Number: 298A00009681



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 12, 1998

CAMILLE MICHAEL
C/O ROBERTSON DOUBLE & BOASE
322 VISTA DEL MAR
REDONDO BEACH, CA 90277-5485

SUBJECT: FLORIDA SUNSHINE HEALTH CARE LIMITED PARTNERSHIP
Ref. Number: B93000000166

We have received your document for FLORIDA SUNSHINE HEALTH CARE LIMITED PARTNERSHIP and your check(s) totaling \$208.75. However, the document has not been filed and is being retained in this office for the following:

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

We have a Florida corporation by the name of Rehabco, Inc. but we can't hook it up with the one you have listed on the annual report. Please look at the attached print out and advise me if this is the same corporation. If not the corporation will have to qualify and do a doing business as name for the State of Florida (because the name will not be available).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 798A00013631

**CERTIFICATE OF AMENDMENT
TO
APPLICATION FOR REGISTRATION
OF**

FLORIDA SUNSHINE HEALTH CARE LIMITED PARTNERSHIP

(insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.173, Florida Statutes, this foreign limited partnership hereby submits this certificate of amendment to its registration application:

The registration application is amended as follows:

Sunshine Rehab Inc. (formerly Rehab Administration Inc.) has withdrawn as general partner and Rehabco Inc., 1475 Terminal Way Suite E Reno, Nevada 89502 is the new general partner of Florida Sunshine Health Care Limited Partnership.

F990000002174

W.P.G. Double
(Signature of a General Partner) *General Partner*

W.P.G. Double for REHABCO, INC.

(Typed or printed name of General Partner signing above)

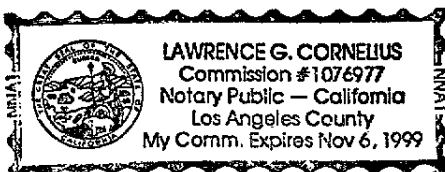
FILED
98 APR 16 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF California

COUNTY OF Los Angeles

On this 3rd day of March, 19 98, W.P.G. DOUBLE personally appeared before me,

- ☒ who is personally known to me
☐ whose identity I proved on the basis of _____



Lawrence G. Cornelius
(Notary Public Signature)

LAWRENCE G. CORNELIUS
(Notary's Printed Name)

Seal

My Commission Expires: 11/6/99