Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000013053 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name Account Number : FCA000000023

: C T CORPORATION SYSTEM

Phone

: (850)222-1092

Fax Number

: (850)222-9428

BASIC AMENDMENT

SEMPERCARE HOSPITAL OF PANAMA CITY, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Mackenale, Filing, Manua

gornoreto filing

https://efile.sunbiz.org/scripts/efilcovr.exe

* /= ^ /~ ^ ~

Į

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I		
(1-3)	MUST BE COMPLETED)	

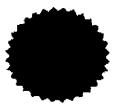
(1-3 MOS1)	BE COMPLETED)
P02000000698	15.50 15.50 15.50
	of corporation (if known))
1 SemperCare Hospital of Panama City, Inc.	
(Name of corporation as it appears	on the records of the Department of State)
2 Delaware	3. 2/07/02
(incorporated under laws of)	(Date authorized to do business in Florida)
ኖኮስ	CTION II
	THE APPLICABLE CHANGES)
4. If the amendment changes the name of the corporation,	when was the change effected under the laws of
its jurisdiction of incorporation? 01/10/05	
5. Select Specialty Hospital - Panama City, Inc. (Name of corporation after the amendment, adding suff	iv "corporation" "commany" or "incorporated" or
appropriate abbreviation, if not contained in new name	e of the corporation)
(If new name is unavailable in Florida, enter alternate co	morate name adopted for the numose of transacting
business in Florida)	whatere may agobies for ma bashage at auton-see
6. If the amendment changes the period of duration, indica	tte new period of duration.
(New)	w duration)
7. If the amendment changes the jurisdiction of incorporat	ion, indicate new jurisdiction.
(New	jurisdiction)
Just 2 de la constante	1 to the
(Signature of a director, president or other officer - if in the of a receiver or other court appointed fiduciary, by that fid	thands (Date)
Michael E. Tarvin	Vice President & Secretary
(Typed or printed name of person signing)	(Title of person signing)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "SEMPERCARE HOSPITAL OF PANAMA CITY, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "SELECT SPECIALTY HOSPITAL - PANAMA CITY, INC.", THE TENTH DAY OF JANUARY, A.D. 2005, AT 2:41 O'CLOCK P.M.



Flarmet Smith Himoson

AUTHENTICATION: 3617078

DATE: 01-13-05