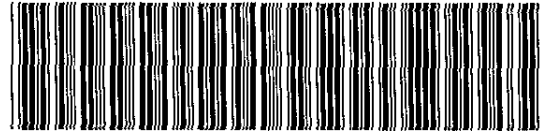


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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



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TO: Amendment Section
Division of Corporations

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Delray Rehab. LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L0300011538

Please return all correspondence concerning this matter to the following:

Aleksandr Prasiev
(Name of Person)

Delray Rehab, LLC
(Name of Firm/Company)

101 So. Congress Ave. #1
(Address)

Delray Beach, FL 33445
(City/State and Zip Code)

For further information concerning this matter, please call:

Aleksandr Prasiev at 561 921-0904
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: DeRAY Rehab, LLC
2. The mailing address of the limited liability company is : 101 So Congress Ave
Suite # 1, Delray Beach, FL 33445
3. Date of filing/registration in Florida March 31, 2003
4. Document number L0300011538

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

SUZANNE DARBIER
Name
101 So. Congress Ave. Suite 1
Address
Delray Beach, FL 33445
City, State and Zip

6. The name and address of the new registered agent and/or office:

Aleksandr Prasievi
Name
101 So Congress Ave # 1
Florida street address (P.O. Box NOT acceptable)
Delray Beach FL 33445
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

SUZANNE DARBIER
(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314