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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944 \*\*Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.\*\*

> LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MARAVILLAS REHABILITATION CENTER LLX

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Articles of Amendment to LLC Articles of Organization	n of	
MARAVILLAS REHABILITATION CENTER LLX		
The Articles of Organization for this Umited Liability Company were filed on and assigned Florida document number		
This amendment is submitted to amend the following:		
ADD AMBO LA:ARISLEIDYS FERNANDEZ address : 7715 NW 48 ST UNIT 350		
DORAL 33166		
REMOVED :WALTER GUITIERREZ :address 7715 NW 48 ST UNIT 350		
DORAL FL 33166		
CHANGE NAME: MARAVILLAS REHABILITATION CENTER LLC		
These articles of amendment were adopted on	. TALL	202
Dated	AHAS	- 030 -
	SEE, F	-1 PH
Signsture of a member or authorized representative of a member  And Color of a member of signee  Typed or printed name of signee	STATE LORID,	H 3: 22
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of position.	Fithe	10

Signature of New Registered Agent, if changing