

N120000003843

(Requestor's Name)

(Address)

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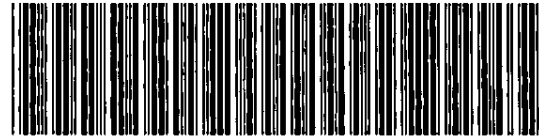
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



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Special Instructions to Filing Officer:

Felix Garcia gave permission to correct document DC 11/8/13

Office Use Only

Amend.
11/8/13
DC

U.S. PUBLIC RURAL HEALTH SERVICES, CORP.

3109 NORTH WEST 133rd. STREET
OPA-LOCKA, FLORIDA. 33054

ATTN. TO: MS. RUBY DUNLAP, Reg. Specialist

Filling Department

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

P. O. BOX 6327

TALLAHASSEE, FLORIDA. 32314

RE: U.S. PUBLIC RURAL HEALTH SERVICES, CORP.

NON-PROFIT CHARITABLE ORGANIZATION

No. N12000003843 / I.R.S. E.I.N. No. 80 – 0793504

Dear Ms. R. Dunlap.

We like to take this opportunity to mention our appreciation for your courtesy and patience for every time we had the pleasure to engage with a conversation of a concerning issue, as the first time when you advised us about the remaining funds.

As promise; I'm forwarding you enclosed a Money Order for \$35.00 so your staff make all corrections and adopting the legal language advised and required by U.S. Dept. of Treasury & I.R.S. 1023 501 c 3 Tax Exempt Application for this Non-Profit Charitable Organization; such as the Purpose Clause, Mission Clause, Dissolution Clause, Conflict of Interest Clause & the Org. By Laws.

In addition to have in place, Armando Alejandro Leyva, as President, Enrique Eugenio Vesa, as Treasurer, and Maria Elena Alvarez, as Vice-President & Felix A. Garcia, as the registered agent, Please remove completely the following: Gamaliel Rivera, Arodis Marzo, Noslen Sanchez-Mesa and Yesit J. Campo (BIZCPAS, LLP). Organization New Address: 3109 North West 133rd. Street, Florida. 33054.

At this time we are holding IRS 1023 501 c 3. Application revised, where the above corrections were requested and be return. We need to return ASAP the above mention application with the Articles of the Corporation change and the Non-Profit Charitable Org. Legal Language adopted as above is described.

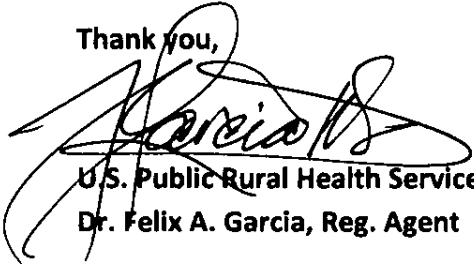
Page 2

**U.S. Public Rural Health Services, Corp
N12000003843 / E.I.N. 80 – 0793504**

We like to request your cooperation by forwarding VIA FAX (305 260 – 0542) The New Articles of Corporation with the pertaining requested changes, so we can expedite a copy with the IRS Application. You could mail at later time or at your earliest convenience our Regular Copy for our records to 3109 N.W. 133rd. St. Opa-Locka, Fl. 33054.

We like to take this opportunity to mention our gratitude for all of you courtesy and cooperation, but above all, your patience and guidance through all this process. Thank you so much and wish you the best for these great holydays to come.

Thank you,



**U.S. Public Rural Health Services
Dr. Felix A. Garcia, Reg. Agent**

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: U.S. PUBLIC RURAL HEALTH SERVICES, CORP.

DOCUMENT NUMBER: N12000003843

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

FELIX A. GARCIA

(Name of Contact Person)

U.S. Public Rural Health Services, Corp.

(Firm/ Company)

3109 NORTH WEST 133rd. STREET

(Address)

OPA-LOCKA, FLORIDA. 33054

(City/ State and Zip Code)

USPRHS@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Armando Alejandro Leyva at (**407**) **952-6363**

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|--|--|---|--|

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

U.S. PUBLIC RURAL HEALTH SERVICES, CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

N12000003843

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

3109 North West 133rd. Street
Opa-locka, Florida. 33054

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

FELIX A. GARCIA

3109 North West 133rd. Street

(Florida street address)

New Registered Office Address:

Opa-locka

Florida

33054

(City)

(Zip Code)

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 the position.


Signature of New Registered Agent, if changing

13 NOV - 7 PM 4:50

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>President</u>	<u>Armando Alejandro Leyva</u>	<u>(Return to President)</u> <u>6200 Shenandoah Way</u> <u>Orlando, Florida. 32807</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V-President</u>	<u>Maria Elena Alvarez</u>	<u>(Return to Vice-President)</u> <u>9222 South West 149th. Ave.</u> <u>Miami, Florida. 33196</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Treasurer</u>	<u>Enrique Eugenio Vesa</u>	<u>(Continue Treasurer)</u> <u>16314 South West 66th. Street</u> <u>Miami, Florida. 33193</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <i>Remove <input checked="" type="checkbox"/> Remain Same</i>	<u>V-President</u>	<u>Noslen Sanchez-Mesa</u>	<u>(Total Remove)</u> <u>16314 South West 66th. Street</u> <u>Miami, Florida. 33193</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>President</u>	<u>Gamaliel Rivera</u>	<u>(Total Remove)</u> <u>3780 North West 22nd. Ave. Apt # 302</u> <u>Miami, Florida. 33142</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>

The date of each amendment(s) adoption: _____

Oct. 17, 2013

Effective date if applicable: _____

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated _____

Oct. 17 2013

Signature _____

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Armando Alejandro Leyva

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

U.S. PUBLIC RURAL HEALTH SERVICES CORP.
NON-PROFIT CHARITABLE ORGANIZATION / N12000003843
Employer Identification Number (E.I.N.) 80-0793504
STATE OF FLORIDA

ARTICLE III

Purposes of the Corporation:

Line 1. -) PURPOSE CLAUSE

The U.S. Public Rural Health Services Organization is organized in the State of Florida exclusively for charitable activities, and educational, to offer, and provide complete comprehensive health & dental care services accessible and available to all general public of underprivileged rural communities and poor citizens in distressed in rural areas, to bring relief of the poor, to the elderly and the homeless, eliminating prejudice and discrimination for all, to offer related advance in educational and training medical science programs, preserved public health and safety for all, building or constructing , and open to operate additional healthcare and a mental health facilities in order provide better accessibility and shorten distance when seeking for healthcare, build or construct, and open to operated dispatching terminals, to provide emergency medical transportation & non-emergency medical transportation.

Above all, this corporation is organized to Eliminate or Eradicate the Health Care Deficit in all rural areas of the State of Florida; without discrimination for their citizens in their communities; protect all human kind & races and or minorities, protecting their cultural & religion background, protect their very own heritage and dignity. To help and contribute to develop a community growth and financial stability and independence promoting and helping to bring to the area better living conditions. This Public Charitable Status Organization shall be receiving all or substantial financial support, from the general public, organizations & foundations and above all, governmental agencies or units by grants. Purposes under section "501 (c) (3)" of the Internal Revenue Code.

U.S. PUBLIC RURAL HEALTH SERVICES CORP.
NON-PROFIT CHARITABLE ORGANIZATION / N12000003843
Employer Identification Number (E.I.N.) 80-0793504
STATE OF FLORIDA

Line 2. -) ORGANIZATIONAL MISSION

U.S. PUBLIC RURAL HEALTH SERVICES ORGANIZATION MISSION STATEMENT

U.S. PUBLIC RURAL HEALTH SERVICES; bears the primary eminent responsibility and firm commitment to eliminate or eradicate the devastating Health Care Deficit at the Underserved Poor Rural in the State of Florida. Provide a complete comprehensive healthcare & dental care, free for all the residents without the financial means, regardless ethnic, culture, child, women or men, young or old, regardless the color of their skin, immigrants, minorities, farm and field workers. But we shall not be limited we shall assist families with once a month food package, to bring to these rural areas better living conditions to receive medical assistance building additional healthcare facilities, part or a portion shall be use for vocational health training education for potential interest near residents, which it would be use as well, for emergency shelter on natural disaster events, these efforts provides to the area employment, community growth, helping to have financial independence by economic impact an incentive or invitations for entrepreneurs bringing more business and housing development. In addition U.S.P.R.H.S. will build a dispatching terminal offering a transportation system to assist the patient's residents to be transported to nearby hospital or other health care providers. Therefore is not enough for us just to eliminate the healthcare deficit, but by passing and serving these rural communities and counties, we have the opportunity to make an assessment learning how to improve by helping and collaborating to offer better living conditions and the opportunity to improve where they live. It is our commitment to have an operation cost effective in order to utilize and maximized the use of funds provide to U.S. Public Rural Health Services, Org. and continue to improve our services and by helping along the way each county and rural communities we reach solving the problems and correct them.

These healthcare and additional efforts shall be delivered by four large Mobile Medical Units, county by county, day by day, with every intention to control at first, and ultimately eliminating the devastating long overdue health deficit, reaching out to the poor citizens in a great need for our services. Follow up you shall find some of the services U.S.P.R.H.S. shall provide.

Services to be rendered:

Multi-Disciplinary Medical Specialties
Medical Practice
Non-Emergency Out-Patient Surgery

Medical Laboratory

Radiology & Diagnostic Imaging

Pharmaceuticals

Medical Durable Equipment & Supplies

Dentistry & Oral Hygiene

Dental Radiology

Dental Laboratory

Additional Multi-Disciplinary Medical Facilities

Medical Training Educational Career Programs

Emergency Shelter & Food (During Natural Disasters)

Emergency Medical & Non-Medical Emergency Transportation

Employees Child Care Program

After School Programs

Fundraising Programs

Mental Health Rehab & Crisis Intervention

Monthly Package Family Food Drive

TV & Radio Broadcasting System (Information / Health / Education)

**U.S. PUBLIC RURAL HEALTH SERVICES CORP.
NON-PROFIT CHARITABLE ORGANIZATION / N120000003843
Employer Identification Number (E.I.N.) 80-0793504
STATE OF FLORIDA**

ARTICLE 8

DISOLUTION CLAUSE

Line 1.-) Upon the dissolution of this organization (U.S. Public Rural Health Services, Corp.), assets shall be distributed for one or more tax exempt purposes with the meaning of Section 501 (c) (3) Internal Revenue Service's Code 1023 U.S. Treasury Department, or corresponding section of any future Federal Tax Code, or shall be distribute to the Federal government, or to State, or local government, for Public Use. (Ref. Publication 557 Tax-Exempt Status)

Attc. #3