N9700005209

CT CORPORATION

CORPORATION(S) NAME		ANZ APR 25 F	<u>1</u>
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		FLORITE	
		950	
4) NPF Rehabilitation, Inc.	Illinois	7	-
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		500005347785	
· · · · · · · · · · · · · · · · · · ·		500005347785 -04/25/0201003-	-028
		*****35.00 ******	35.00
() D			
() Profit () Nonprofit	() Amendment	() Merger	
() Foreign	() Discolution Mariet 1		
() I otolgh	() Dissolution/Withdrawal () Reinstatement	() Mark	
() Limited Partnership	() Annual Report	() 01	
() LLC	() Name Registration	() Other	
	() Fictitious Name	(x) Change of RA () UCC	
() Certified Copy _ =	() Photocopies	() CUS	
		() 000	
() Call When Ready	() Call If Problem	() After 4:30	· —
(x) Walk In	() Will Wait	(x) Pick Up	
() Mail Oav			
AH CHART			
Name 2	4/25/02	Order#: 5266581	
Availability 55			
Examiner		kf	
Updater		Ref#:	
Verifier	·	-	
W.P. Verifier		,	- :
- CALLED	•	Amount: \$	

C. Coulliste APR 2 5 2002

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provision the undersigned corpora				508, Florida Statu	tes,
submits the following sta the State of Florida.				red agent, or both	— , in 1982
1. The name of the corpo	oration : <u>NPF REHA</u>	BILITATION, INCII	LINOIS		APR 2
2. The mailing address o	f the corporation:	1501 N.W. 9th Avenue		m _c	Si Si
Miami, Florida 33136-1494			,	- LOR	2
3. Date of incorporation	qualification: 09/	15/1997	Document number	r: <u>N97000005209</u>	20
4. The name and address	of the current reg	istered agent and off	ice:		
American	Information Services	, Inc.			
One S.E.	ord Avenue., 28th fl.				
	orida 33131				
5. The name and address	of the new registe (P. C	ered agent (if change). Box Not Acceptal	d) and/or registered ble)	d office (if changed	l):
C T Corpo	oration System			- .	_
c/o CTC	orporation System, 12	200 South Pine Island R	oad,	-	-
	, Florida 33324				
The street address of its agent, as changed, will	registered office a be identical.	and the street addres	ss of the business o	office of its register	red
Such change was authorauthorized by the board	rized by resolution	duly adopted by its	s board of directors	s or by an officer s	0 ~
	er, chairman or vice cha			(Date) ()) L
HERBERT/ZEME	EL, PRESIDEN	Τ		`	
(Prin	ted or typed name and t	itle)			
Having been named as corporation, I hereby a I further agree to comp performance of my duti registered agent. C T Corporation System By: (Signature of the corporation of the corpora	ccept the appoint ly with the provisi	neni as registerea a lons of all statutes r	gent and agree to t elative to the prope	er and complete	<i>7.</i>
If signing on behalf of an er	tity:	James A. Barri			
(Typed or I	rinted Name)	James A. Borde Assistant Secr	(0	<i>i</i>	

* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)