## N97000005210

**CT** CORPORATION

CORPORATION(S) NAME		TALLAHAS	FILED PR 25 P
		SEE FLORID	ED
5) NPF Rehabilitation, Inc1	Índiana		<b>-</b>
		<b>800005347</b> -04/25/020 *****35.00	- 7885 1003029 *****35.00
() Profit	() Amendment	() Marrow	<b>-</b>
() Nonprofit () Foreign	() Dissolution/Withdrawal () Reinstatement	() Merger  () Mark	<del>-</del>
() Limited Partnership () LLC	() Annual Report () Name Registration () Fictitious Name	() Other (x) Change of RA () UCC	<u> </u>
() Certified Copy  () Call When Ready	() Photocopies	() CUS	<b>-</b>
(x) twalk in (x) twalk in (y) Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up	
Name 2 2000 Name Availability 2000 Name Documents	4/25/02	Order#: 5266581	
Examiner  Updater  Verifier  W.P. Verifier	•	kf Ref#: Amount: \$	

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 G. Coulliste APR 2 5 2002

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

Pursuant to th	ne provisions of sections 607.05	02, 617.0502,	607.1508, or 617.15	08, Florida Sta	atutes,		
_	ed corporation organized under t	-	•				
-	llowing statement in order to cho	ange its registe	ered office or register	red agent, or bo	oth, in		
the State of Fl			DIDILLI	AL C	200		
1. The name o	f the corporation: NPF REHABILI	TATION, INC	INDIANA		<u>-72</u> <u>A</u>		
			·		APR 2		
2. The mailing	gaddress of the corporation: 1501	N.W. 9th Avenu	ie		<u> </u>		
Miami, Flor	rida 33136-1494				P		
3. Date of inc	orporation/qualification: 09/15/19	97	_ Document number	: N97000005210	D::0		
4. The name a	nd address of the current register	ed agent and of	ffice:	» »			
	American Information Services, Inc.			_			
	One S.E. 3rd Avenue., 28th fl.						
	Miami, Florida 33131						
5. The name a	nd address of the new registered (P. O. Bo	agent (if chang ox Not Accepta		office (if chang	ged):		
	C T Corporation System						
	c/o C T Corporation System, 1200 S	outh Pine Island	Road,	•			
	Plantation, Florida 33324						
The street add agent, as chan	lress of its registered office and t ged, will be identical.	the street addre	ess of the business of	fice of its regis	stered		
Such change v	was authorized by resolution dul	y adopted by i	ts board of directors	or by an office	r so		
authorized by	the board.			411	100		
(Signatur	re of an officer, chairman or vice chairman	of the board)		(Date)	7,		
ζ, τ							
HERBE	PRESTDENT (Printed or typed name and title)	1	<u></u> .				
corporation, I	named as registered agent and to I hereby accept the appointment e to comply with the provisions of of my duties, and I am familiar v ent.	as registered of of all statutes i	agent and agree to ac relative to the proper	ct in this capac · and complete	rity.		
C T Corporation By:	( Januar C)		4/25	100	_		
	(Signature of Registered Agent)		(Date)				
If signing on beh	nalf Man entity:	James A	A. Bordonaro				
	(Typed or Printed Name)  Assistant Secreta(Vapacity)						
	(Then or yemmer summe)		(Anhany)				

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