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BASIC AMENDMENT

FLAGLER REHABILITATION CENTER, INC.

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9/25/03

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 26, 2003

FLAGLER REHABILITATION CENTER, INC. 4697 W FLAGLER STREET MIAMI, FL 33126

SUBJECT: FLAGLER REHABILITATION CENTER, INC.

REF: P02000102091

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Teresa Brown Document Specialist FAX Aud. #: H03000284776 Letter Number: 303A00053000 . . . ř

LAZARUS CORPORATION

FAX: 3052201440

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AKTICLES OF AMENDMENT

FILED

03 SEP 26 AH 10: 26

SECRETARY OF STATE
TALLAHASSIL, FLORIS.

TO

ARTICLES OF INCORPORATION

OF

FLAGLER REHABILITATION

CENTER, INC.

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST:

Amendment(s) adopted: (indicate anicle number(s) being amended, added or deleted)

ARTICLE 5- REGISTERED AGENT OFFICE:
RODOLFO ADDRIGUEZ

4697 W. FLAGLER ST.

MIAMI, FL. 33126

ARTICLE 6-BOARD OF DIRECTORS:
RODOLFO RODALGUEZ, PHISID
4697 W. FLAGLER ST.
MIAMI, FL. 33126

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the anwadment if not contained in the amendment itself, are as follows:

NA

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SEP-26-03 FRI SEP-25-63	10:16 AM : 03:59 Pm	AZARUS CORPORATION	- 43	2201440 305 642 3	PAGE 4
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	,	no 5000.	, <u>-</u>	· -11.	
באנונג	The date o	feach amandment's ad	loption:	9/15/0	<u> </u>
FOURT	Ilt Adoption	of Amendment(s) (see	ik ome)	•	
Cas	e amendment(t for the amend	s) was/were approved b iment(s) was/were suff	by the stateholde Reignt for approv	ra. The number al.	rofvotes
O m	e smendmein(s) was/were approved b	y the shareholder	a iptonep sotju	g groups.
	The folio vuling gro	wing statement must be oup entitled to vote sepa	separately provide rately on the ame	d for each nument(s):	
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	Signed this	5 TH day of	SEPT	a 200	<u>3</u> .
	Signat	By the Chairman or Vice C President or other officer i	Theirman of the Box	PRES	
•		(8y a chractor if \$0	IR Jopted by the direct	orsi	
		7)R or if adopted by the	incorporators)	
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CERTIFICATE DESIGNATING REGISTERED AGENT/REGISTERED OFFICE

1.	The name of the corporation is:					
	FLAGLER REHABILITATION CENTER, INC.					
2.	The name and address of the registered agent and office is:					
	RODOLFO RODRIGUEZ					
	(P. O. BOX NOT ACCEPTABLE)					
	(P. O. BOX NOT ACCEPTABLE)					
	m(9m1, FL. 33126					
	(CITY/STATE/ZIP)					
	SIGNATURE TABLETO S					
	(Corporate Officer)					
	TITLE PRES-					
	DATE 09/15/03					

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 507.325 FLORIDA STATUTES.

SIGNATURE (Registered Agent)

DATE 09/(5/03

HO 30002 4776