1/26/2018



# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

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From:

: C T CORPORATION SYSTEM Account Name

Account Number: FCA000000023 Phone

: (614)280-3338

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

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	-			

# COR AMND/RESTATE/CORRECT OR O/D RESIGN HEALTHSOUTH CORPORATION

Certificate of Status	0
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### **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: HealthSouth Corporation	
	Na	ame of Corporation
DOC	UMENT NUMBER:	P02374
The er	nclosed Amendment and fee are su	ubmitted for filing.
Please	return all correspondence concern	ubmitted for filing.  ning this matter to the following:
	Name of Contact Person	
	Firm/Company	
	Address	<del></del>
	City/State and Zip Cod	le
E	-mail address: (to be used for future a	annual report notification)
For fu	rther information concerning this	matter, please call:
	Name of Contact Person	at (at (
Enclos	sed is a check for the following an	nount:
<u> </u>	\$35.00 Filing Fee S43.75 Filing F Certificate of S	Status  S43.75 Filing Fee & Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed)
Ameno Divisi P.O. B	ng Address: dment Section on of Corporations Box 6327 hassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassec, FL 32301

## PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to	5 s. 607.1504, F.S.)	2018 JAN
C.E.	CTION I	
	CTION I BE COMPLETED)	
(20.000)		<b>Q</b> . ₹
P023	374	~>
(Document number	r of corporation (if known)	P#
		် ယူ
1 Health South Corporation		ω ··
(Name of corporation as it appears	on the records of the Department of State)	
2. Delaware	3, 06/12/1984	
(Incorporated under laws of)	(Date authorized to do business in	Florida)
	CTION II THE APPLICABLE CHANGES)	
4. If the amendment changes the name of the corporation	on, when was the change effected under the	e laws of
its jurisdiction of incorporation? 01/01/2018		
5. Encompass Health Corporation		
(Name of corporation after the amendment, adding s appropriate abbreviation, if not contained in new na		porated," or
Encompass Health Corporation Florida		
(If new name is unavailable in Florida, enter alternate business in Florida)	corporate name adopted for the purpose o	f transacting
6. If the amendment changes the period of duration, inc	licate new period of duration.	
(Ne	w duration)	
7. If the amendment changes the jurisdiction of incorpo	pration, indicate new jurisdiction.	
(New	/ jurisdiction)	
8. Attached is a certificate or document of similar impossible 90 days prior to delivery of the application to the Dehaving custody of corporate records in the jurisdiction	nartment of State, by the Secretary of State	or other official
(Shanting of display and	sident op other officer - if in the hands	_
of a receiver or other court	appointed fiduciary, by that fiduciary)	
Patrick Darby	Executive Vice President	_
(Typed or printed name of person signing)	(Title of person signing)	



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'HEALTHSOUTH

CORPORATION', FILED A RESTATED CERTIFICATE, CHANGING ITS NAME TO

'ENCOMPASS HEALTH CORPORATION' ON THE TWENTIETH DAY OF OCTOBER,

A.D. 2017, AT 1:32 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID RESTATED CERTIFICATE IS THE FIRST DAY OF JANUARY, A.D. 2018.



Authentication: 201958140

Date: 01-11-18