P11000074868

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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: RANGO	REGIONALALICARE CENTER, Incorporat
DOCUMENT NUMBER: <u>P110000</u>	74868 Incorporat
The enclosed Articles of Amendment and fee are submit	eted for filing.
Please return all correspondence concerning this matter	to the following:
ALEXANDIRA M Name of Con	Mathurzini ntact Person
Orlando REGIONA Firm/Co	MANUTARE CENTER, Dompany Incorporated A Rd. Ste 109 Tess
5979 SINELANIA	d Rd. 3te 109
Orlando, FL 3 City/ State as	32819 ad Zip Code
E-mail address: (to be used for future	yahoo com aynual report notification)
For further information concerning this matter, please ca	11:
Alexandra Mathurin at (Name of Contact Person	407) 580 743/ Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made paya	ble to the Florida Department of State:
Certificate of Status C	13.75 Filing Fee & Certificate of Status dditional copy is enclosed) Certified Copy (Additional Copy is enclosed)
	eet Address
	endment Section
······································	ision of Corporations ton Building
	1 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of	-
ORLANDO REGIONAL ALL	CARE CENTER, INCORPORATED
(Name of Corporation as currently filed with the	ne Florida Dept. of State)
P 11000074868 (Document Number of Corporation	
Pursuant to the provisions of section 607.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	: The new
name must be distinguishable and contain the word "corporabbreviation "Corp.," "Inc.," or Co.," or the designation "Co name must contain the word "chartered," "professional associate	ration," "company," or "incorporated" or the rp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SEGRETARY OF SH
D. If amending the registered agent and/or registered office a	address in Florida, enter the name of the Ro
new registered agent and/or the new registered office add	ress:
Name of New Registered Agent:	NA
	NIA
New Registered Office Address: (Florid	la street address)
(City)	A, Florida A . (Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famil	<u>ent:</u>

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)

Title, Nam	<u>e</u> .	Address	Type of Action
P JEA	N F. RODNEY	5979 Vineland Ro Oxfando, FZ	Add Remove
D Rom	rulus Claude	5979 Vine land Re Orlando, Fl 3281	A.□ Add Remove
			☐ Add ☐ Remove
	lding additional Articles, enter o		
(attach additional i	sheets, if necessary). (Be specifi	ic) 	
	. 1		
	- A 1 1		
		13/ 6/	
provisions for in	t provides for an exchange, reclanded in the amendment if nable, indicate N/A)		
	1 1		
	/\		
		1 / /	
		1	

The date of each amendment(s)	
Effective date <u>if applicable</u> :	9) (date of adoption is required)
•	no more than 90 days after amendment file date)
<i>y</i> '	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval
by	N/A . "
(v	oting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated 9/	14/2011
Signature <u>/</u>	omulus Claude
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary)
-	Claude Romulus
	(Typed or printed name of person signing)
_	Director.
	(Title of person signing)