P150010001

•		
. (Requestor's Nam	ne)
(Address)	
(Address)	
(City/State/Zip/Ph	one #)
PICK-UP	☐ WAIT	MAIL
. (Business Entity N	Name)
	Document Numb	per)
Certified Copies	Certifica	ates of Status
Special Instructions	to Filing Officer:	
		ļ

Office Use Only



300314498193

08/15/18--01013--007 **35.00

2018 JUN 15 PM 1:28
SECRETARY OF STATE
TALLAHASSEE.FLORIDA

C. GOLDEN
JUN 1 8 2018

COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION:IREH MEDICAL	CENTER CORP	
DOCUMENT NUMBER	R: P15000100001		
The enclosed Articles of A		abmitted for filing.	
Please return all correspon	ndence concerning this ma	atter to the following:	
RC	SSANA PONTILES		
	···	Name of Contact Person	n
JIF	REH MEDICAL CENTER	CORP	
_		Firm/ Company	
79	00 NW 33RD STREET		
		Address	
нс	DLLYWOOD, FLORIDA	33024	
		City/ State and Zip Cod	c
JIMENE	ZACCOUNTING@GMA	IL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	ncerning this matter, pleas	se call:	
ROSSANA PONTILES		954 at (de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendi Division P.O. Bo	Address nent Section n of Corporations x 6327 see, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2018 JUN 15 PM 1:28

of State TALL AHASSEE. FLOR
opts the following amendment(s) to
The new
rated" or the abbreviation tion name must contain the
e of the
Florida
(Zip Code)

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

. Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doc	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	MARTHA FERNANDEZ	7900 NW 33RD STREET
Add			HOLLYWOOD, FLORIDA 33024
X Remove			•
2) Change	VP	ROSSANA PONTILES	7900 NW 33RD STREET
Add			HOLLYWOOD, FLORIDA 33024
X Remove			
3) Change	P _	ROSSANA PONTILES	7900 NW 33RD STREET
X Add			HOLLYWOOD, FLORIDA 33024
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			-
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
		
		, <u></u> .
·		
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
· ·		

	doption:, if other than
date this document was signed.	
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Note: If the date inserted in this be document's effective date on the Do	lock does not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
JUNE 12T	11 2018
Dated	
Signature 🚣 🖊	The det of the
(By a c	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
up p v v v	ROSSANA PONTILES
	(Typed or printed name of person signing)
	VICE PRESIDENT
	(Title of person signing)