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R. WHILE

## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: _	Ruval Rei	hab Solutions,	Inc	
DOCUMENT NUMBER:	P160000075	579		
The enclosed Articles of Amendm				
Please return all correspondence c	oncerning this matt	ter to the following:	_	• • • • • • • • • • • • • • • • • • • •
	<b>,                                    </b>	Mitch Friedma	·	
<del></del>	<del></del> -	Name of Contact Person		
		RRS		
		Firm/ Company		
	3440	Young fix (d	St. #	358
		Address		
	wh	City/ State and Zip Code	7.	のひろう
<del> </del>	<u> </u>	City/ State and Zip Code	2	
	Hamana	a was do no	- 10	.2.
Garantina da Harris E-mai	l address: (to be us	ed for future annual report	notification	1)
	3 3	, , , , ,		
For further information concerning		e call:		
Gara K. Holm	JC,	al ( <u>720</u> Area Co	)_9	29.0086.
Name of Contact	Person	Area Co	de & Dayti	me Telephone Number
Enclosed is a check for the follow	ving amount made [	payable to the Florida Depa	artment of S	State:
	3.75 Filing Fee & ctificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi (Addi	D Filing Fee cate of Status ed Copy ional Copy losed)
Mailing Addr Amendment So Division of Co P.O. Box 6327 Tallahassee, F	ection rporations	Amen Divisi Clifto 2661	Address dment Section of Corpo n Building Executive Coassee, FL. 3	rations enter Circle

## Articles: of Amendment to Articles of Incorporation

## FILED

Articles of Incorporation of

16 SEP -6 PH 1: 00

Rural Rehab	Solutions, 1	ogsecheraly of all	73 L
(Name of Corporation as c	currently filed with the	Florida Dept. of State)	I. I.JA
(Document No	umber of Corporation (i	(known)	
ursuant to the provisions of section 607.1006, Florida Statut Articles of Incorporation:	tes, this <i>Florida Profit</i> e	Corporation adopts the fol	llowing amendment(
. If amending name, enter the new name of the corporat	tion:		
NA			m)
NAM  www.mast be distinguishable and contain the word "cor  "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc  ord "chartered," "professional association," or the abbrev	c. " or "Co". A profes	or "incorporated" or sional corporation name	the abbreviation must contain the
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS	$\frac{N/r}{r}$		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MA		
If amending the registered agent and/or registered off new registered agent and/or the new registered office    No.   Amending the registered agent and/or the new registered office		enter the name of the	
Name of New Registered Agent /Y/H	<u></u>		
······································	Torida street address)		
New Registered Office Address:	:	, Florida	
	(Ciţy)		(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f	e <mark>d Agent:</mark> familiar with and accep	t the obligations of the po.	, sition.
Signature	of New Registered Age	nt, if changing	**************************************

(Attach additional shee Please note the officer, P = President; V='Via Executive Officer, CF held President, Treast Changes should be not	ets, if neces director til e Presiden O = Chief wer, Direct ted in the fo	isary)  tle by the first letter of  tt: T= Treasurer; S=  Financial Officer  to would be PTD,  ollowing manner. Corporation, Sally Si	of the office title:  Secretary: D= Director: TR=  If an officer/director holds more  surrently John Doe is listed as the surrently of the property of the pro	ter/director being removed and title, name, and  Trustee: C = Chairman or Clerk; CEO = Chief  The than one title, list the first letter of each office  the PST and Mike Jones is listed as the V. There is  se should be noted as John Doe, PT as a Change.
Example: X Change	PT	John Doe		ian Fridman 18 listed as Prosidents, Jonathan Friedman is now VA
X Remove	<u>V</u>	Mike Jones	and Mitch Fried	luman is added as President
_X Add	<u>sv</u>	Sally Smith	Saran Nicholson	Shall remain Searchy my.
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change	<u>.p</u>	Mite	h Friedman	3440 YoungAxId St. # 258
Add				Mont Ridge, 10 84033
Remove				
2)Change	VP	Jona	Huan Friedman.	3440 Young # 8 ld St # 358
Add				Wheat Ridge, CO 80032
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		· · · · · · · · · · · · · · · · · · ·		
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
. N/R	
	İ
	!
	<del></del>
If an amendment provides for an exchange, reclassification, or can	cellation of issued shares,
provisions for implementing the amendment if not contained in the	e amendment tself:
(if not applicable, indicate N/A)	
<i>N/A</i>	
(	
	!

The date of each amendment(s) adoption: date this document was signed.		, if other than the
Effective date if applicable:	Ino more than 90 days after amendment f	
	ino more than 90 days after amendment f	ile date)
	es not meet the applicable statutory filing requ	
Adoption of Amendment(s) (	CHECK ONE)	
The amendment(s) was/were adopted by by the shareholders was/were sufficient to	the shareholders. The number of votes east for approval	the amendment(s)
The amendment(s) was/were approved by must be separately provided for each vo	y the shareholders through voting groups. The ting group entitled to vote separately on the an	following statement nendment(s):
	mendment(s) was/were sufficient for approval	
by	(voting group)	o.
The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action	on and shareholder
Dated Signature A	the incorporators without shareholder action a	
(By a divector, selected, they are	president or other officer – if directors or office meorporator – if in the hands of a receiver, true ciary by that fiduciary)	stee, or other court
	Jonaphan D fried	han
····	(Typed or printed name of person signing)	
	U.P.	
	(Title of person signing)	1